

A thesis submitted for the Professional Doctorate in Psychoanalytic Child Psychotherapy in partial fulfilment of the requirements of the University of East London, in collaboration with the Northern School of Child and Adolescent Psychotherapy Leeds and the Tavistock Portman NHS Foundation Trust.

### **The Research Title**

**What can be learned from comparing a child psychotherapist's experience of a children's psychotherapy group with narrative accounts of foster carers describing the same children in their care?**

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In order to protect confidentiality, pseudonyms have been used and all identifying details of the children and their foster carers have been changed. To this end, historical or biographical information has sometimes been disguised. This withstanding, the content of the clinical experience has been preserved.

## **Abstract**

This research project explores a child psychotherapist's experience of a children's psychotherapy group with five, infant school age, 'looked after children' with early experiences of neglect, trauma and disruption. These children have experiences of multiple placements either in their family of origin or since coming into care. They are all in transition awaiting decisions about future adoptive or long-term foster placements.

The research project considers the experiences of both the children and their foster carers. It asks what can be learned from comparing a child psychotherapist's experience of the children in a children's psychotherapy group with the narrative accounts of foster carers describing the same children in their care? With this question in mind, the research project uses a ten-week children's psychotherapy group and semi-structured interviews with the children's foster carers to examine the relationships these children form within the group and with their foster carers.

The research project aims to capture the emotional experience of being with young 'looked after children', living in foster care and awaiting decisions regarding placement and the prospect of yet further placement moves. The study reflects on whether gathering information on the foster carer's experience would be useful in planning future support for both the children and their foster carers. Do these comparisons provide valuable information that helps facilitate decision-making within the professional networks maintaining both the children and their foster carers?

Key words: children's psychotherapy groups, foster carers, disruption, early trauma, 'looked after children', multiple placements, semi-structured interviews.

### **A Dedication**

This doctoral thesis is dedicated to the memory of my sister, Carol, whose death in March 2013 evoked an overwhelming feeling of missing and awakened memories of our shared early history. This led to thoughts of how intertwined our personalities were; what we carried for each other and how influenced we were by our own losses and the losses of our parents. Her death interrupted the writing of this doctoral thesis but helped in thinking about the influence of the past on the present and the pervasiveness of missing.

## **Acknowledgements**

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A special thank you to Karl Huntbach for his dedicated input (as co-leader of the children's psychotherapy groups pre-dating this research project) and for his contribution to the present format of the semi-structured interviews. A particular thank you to Sarah Hillman, for her open and thoughtful co-leading of the research children's psychotherapy group.

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## **1. Introduction**

This first chapter introduces the reader to the research project by identifying the area of study and discussing in detail why it is of such clinical interest to the researcher-author<sup>1</sup>. The origins of the research project are carefully re-visited.

The second chapter provides some background information on children in foster care and a detailed review of the literature and gaps are identified. Relevant clinical papers are introduced, discussed and explored; key research projects are critically examined and their strengths and weaknesses considered. Important themes are highlighted and brought together.

Chapter three identifies the research question and the aims of the research project.

Chapter four explains the research method, reviews the research methodology and discusses at length why Grounded Theory was the research methodology of choice. The research design is explained and outlined in depth.

Chapter five introduces the reader to the children and the children's psychotherapy group. The coding and analysing of the group is discussed in detail and the findings are presented. The coding and analysing of the foster carers' interviews follows and there is a presentation of these findings in Chapter six. The two sets of findings are then compared and discussed.

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<sup>1</sup> The researcher is both the author of this thesis and the child psychotherapist in the children's psychotherapy group. To assist the reader these terms and I are used at different points to aid clarity.

The concluding chapter summarises what can be learned from this research project. The findings highlighted in earlier chapters are re-visited and their implications for professional practice are considered. Recommendations for future practice and policy are made.

## **1.1 Background to the Research Project**

### **1.1.1 Identifying the Area of Study**

This research project aimed to explore relationships with young ‘looked after children’ in transition, children at the beginning of their ‘care pathways’. It looked at five children in foster care awaiting decisions about future placements, both in the context of a children’s psychotherapy group and in the narrative accounts of the children’s foster carers.

By observing the children and then looking at their foster carers’ accounts of their experiences and relationships with the children, this research project aimed to make explicit, what is often implicit; important aspects of key relationships. These were referred to as their ‘dyadic component’. In the context of this research project, dyadic component refers to the intimate space in the children’s close relationships with their important adults.

By using a children’s psychotherapy group and interviews with their foster carers, both internal and external components of these relationships could be analysed. Children were viewed in two group contexts - within the group and within their foster carers’ family. The question was asked, ‘How do aspects of the children’s way of relating, visible in the group, relate to their foster carers’ experience?’ With this question in mind, this project analysed semi-structured interviews with the children’s foster carers. Comparisons were made and the two sets of data were analysed using an Applied Grounded Theory Research Methodology.

Comparisons were made, examined and explored again to identify ways of improving support and treatment for both the children and their foster carers.

### **1.1.2 The Conceptual Framework**

In presenting the conceptual framework of this research project the researcher was aware that a large volume of psychoanalytic literature already existed which identifies the difficulties children, with early experiences of trauma and disruption, can have when relating to others. Through her clinical experience the researcher was also conscious of the fluctuating nature of the difficulties 'looked after children' are liable to have in negotiating a wide range of situations, and how these can be particularly present at times of transition (starting school, moving into juniors, transferring to secondary school, leaving school and starting work and college). Perhaps the most obviously difficult transition is leaving care. Some 'looked after children' manage these transitions and others do not.

With ordinary, good-enough parenting (Winnicott, 1965), children develop in many ways. They learn to separate, present themselves and develop different and separate identities within their families and school; with their teachers and peers. Some 'looked after children' can face what appear to be insurmountable obstacles in this process. It is often taken for granted that children with early experiences of trauma and disruption are restricted in their development and will not have developed the range of skills and selves that make successful functioning in the world possible.

Attentive to the precariousness of their development and seeking to capture something that could sometimes feel vital and clear, and at other times very elusive, the researcher felt there was a sense of something missing which felt tangibly present but hard to name and put into words.

The researcher sought a wider perspective; one that was more than a detailed description of the children's difficulties. Intuitively, this posited vast benefit providing she was successful in adding depth to understanding; and was able to incorporate something that wasn't quite there yet. Aiming to reduce both the children's and foster carers' difficulties, the research question appears quite simple: What can be learned (about the presence of what is missing?). It was necessary to think creatively and start somewhere with the work of detection.

There are issues in this arena with fragmentation, loss and not being linked to adults. Developmental gaps can appear to be too great and there is the risk to professionals of feeling helpless and overwhelmed. In a modest way, this research project explores how 'looked after children' relate to others and join up their thinking.

The impact of fragmentation also affects foster carers and the professional networks that sustain them. Staying with the experience in process is enormously difficult and the researcher sought to digest and develop experience in two distinct areas (the children's group and the semi-structured interviews). The researcher was aware of limitations, the danger of getting lost and the need to tenaciously stay with something even if it was unclear what this was.

The group, with its structure<sup>2</sup> and setting, was perceived as the most advantageous method of exploring not only the interplay of the children's relationship difficulties (their impact on their peers and important adults) but also the ways in which the children are likely to struggle in managing, which are in fact, ordinary developmental tasks. Small groups are a familiar structure for young children. They work in small groups at school.

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<sup>2</sup> It has been suggested that for the children in the group joining a stranger group with other 'looked after children' is likely to hold particular significance as it could resonate with the experience of joining their foster family. Foster families sometimes contain other 'looked after children'. As a result a children's psychotherapy group as a form of clinical intervention would inevitably bring associations and resonances for the children that could be worked on in the group. The researcher holds the view that any transition, change or joining has the potential to powerfully stir up unprocessed early experiences for these children. The children are often fragile in terms of their internal resources and in terms of their position of uncertainty.

Children's psychotherapy groups build on this and are a means of providing, in a relatively short time frame, a comprehensive assessment for young children in transition. These groups with two co-leaders and five children can feel like sibling groups with two isolated parents. They provide a safe space in which children can explore and be supported with some of their issues in relation to security and families. Anxieties about adults, about parental figures and how the children relate to siblings and peers, is very visible in the group, in the children's language and play.

The structure of the group with its timing and fixed number of sessions enables children's difficulties with separation and beginnings and endings to be identified and worked with in more detail. Themes that emerged within the group could be enormously important in identifying these. The interviews with the children's foster carers were seen as a way of extending this understanding and breaking new ground in this area.

The research question was not a static one; it was organic, unfolding and unpacking itself rather like the experience of the children and their foster carers. The research project aimed to bring different perspectives and positions together. It sought to bring together threads of experience and knowledge: the past and the present, ideas about the repetition of trauma, the experience of time, poor outcomes for children in care, failure and the emotional and financial cost of this.

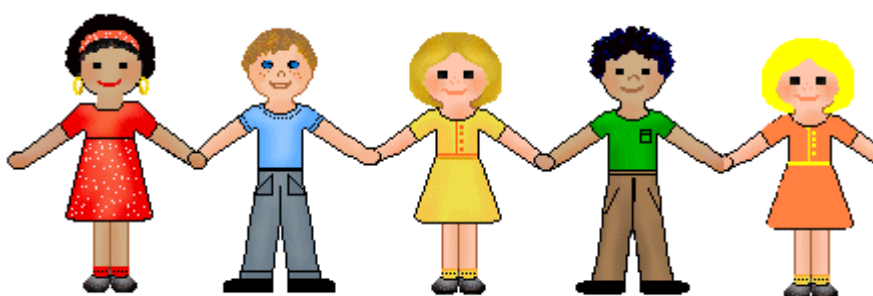
### **1.1.3 The Development of the Research in its Clinical Setting**

Shortly after qualifying as a Child and Adolescent Psychotherapist, the researcher commenced working in a large northern city in a CAMHS-LAC (Child and Adolescent Mental Health Service for 'looked after children') team which works exclusively with children in the care of that city's Children's Services Department. The city has high levels of deprivation. It had a population of over 514,400 (Mid 2013, City Council Figures) and its Children's Services had 1,302 'looked after children' in its care, including

122 unaccompanied asylum seekers (31<sup>st</sup> March 2013 Local figures, Ofsted Report 2014, Appendix A).

Around two hundred of these children are referred to CAMHS-LAC each year. CAMHS-LAC is a small multi-disciplinary team<sup>3</sup> that works to meet the needs of children and adolescents referred to the service providing support for their foster carers and the institutions and networks that maintain them.

The service divides itself between consultation and therapeutic work; consultation to social workers and their networks constitutes the bulk of the work (consultation 60%, therapeutic work 40%). The researcher held one of three child psychotherapy posts within the team, and, whilst her work involved consultation, the main focus of her work was on assessment and direct therapeutic work with children, adolescents and their foster carers.



#### **1.1.4 Addressing Gaps in the CAMHS-LAC Service**

The researcher had become increasingly aware of the gaps in service for young children in care. These gaps were occurring nationally. For example, a study of looked after children under the age of 6 in the care of the London Borough of Haringey (2008-2009), highlighted a disparity between high levels of need and low referral rates. In their study they found that of the 43 pre-schoolers who completed the assessment, 83.7% of the children

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<sup>3</sup> The team includes two child psychiatrists, three child psychotherapists, six clinical psychologists and three senior social work practitioners. Many of these posts are part-time.



needed an intervention but only 7% received adequate input, only 2% of children requiring one or more interventions received the full level of care recommended (Hillen, Gafson, Conlon and Rosen, 2012)<sup>4</sup>.

The CAMHS-LAC team were struggling to meet the needs of young children for assessment and treatment. These children were often in transition, their permanency needs had not yet been fully addressed and high levels of uncertainty existed as a result. Accordingly, very high levels of anxiety were found within the children, their foster carers and the professional networks supporting them.

Children just starting school and sometimes even younger were referred to the CAMHS-LAC team by their social workers. They had often been subjected to extreme experiences of profound neglect over extended periods of time. The majority had witnessed extreme violence within the home, exposing them to prolonged and unsupported experiences of intense fear and anxiety. For some, these experiences of domestic violence were compounded by experiences of direct physical and/or sexual abuse.

Sometimes these children had additional stressful experiences within care. There had been changes of foster placement and/or social worker. The children's social workers were often facing difficult questions about the viability of placements; separating siblings and moving young, vulnerable children on after very long 'short-term' placements. For a 4 year old, a short-term placement of two and a half years does not feel short.

These difficult questions were being faced in the context of Independent Enquiries, Serious Case Reviews, Ofsted and Government Legislation (Appendix A).

When adoption is seen as the best option and permanence the goal, the failure to find young children long-term sustainable placements could lead to enormous guilt and anxiety within professional networks and systems

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<sup>4</sup> The theme of meeting high levels of needs in the light of low referral rates is returned to in the concluding chapter of this thesis.

supporting these children. This could be crippling, sometimes resulting in paralysing passivity in regard to planning. Alternatively, in an effort to address a sense of a child's overwhelmingly difficult predicament, this guilt and anxiety could lead to a tendency to react prematurely in response to a particular crisis, to multiple referrals, to the involvement of yet another resource, or even further placement.

In addition to this cycle of 'passivity' and 'unplanned or unprocessed hyperactivity', there seemed to be a difficulty in holding in mind the experiences of both the children and their foster carers. There was a tendency to polarise the experiences of foster carers and the children in their care. These polarised perspectives could change over time. The frequency with which this occurred was significant and worrying and seemed to be indicative of how difficult a task it was to parent children with experiences of early trauma; how hard it was to give shape and meaning to the overwhelming, painful and confusing experiences of both the children and their foster carers.

In these stressful situations there was often a demand on CAMHS-LAC to provide an in-depth assessment or direct clinical work with a child or their foster carers. Due to the uncertainty and complexity of these cases, there was little time or space to deliver this. There was anxiety within the team about offering children with uncertain placements individual psychotherapy, the intensity of yet another one-to-one relationship they would predictably lose. It seemed important to address this and in the early stages of this research project, an analysis was undertaken; gathering statistics on the numbers and ages of children and adolescents referred to CAMHS-LAC.

The experience of working in CAMHS-LAC, coupled with the analysis of these statistics, revealed significant gaps in services. Children placed for adoption but not yet adopted could not access the support of the Adoption Psychology Team and children placed within the city by out of borough Children's Services could not access the help of the CAMHS-LAC team. These children and their foster carers were offered services by the generic

CAMHS team. Local services were working steadfastly together in an attempt to address these gaps.

Through background reading it was apparent that other child psychotherapists with extensive experience of 'looked after children' had made attempts to address some of these concerns (Hunter, 1993; Hindle, 2000; Kenrick and Tollemache, 2006; Wakelyn, 2008).

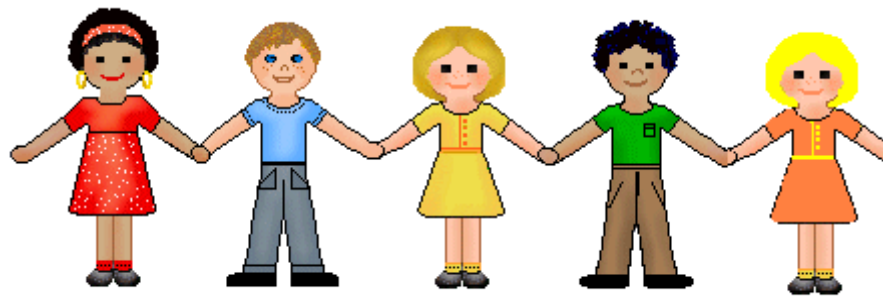
These authors highlighted difficulties 'looked after children' faced in transition and challenged the complacency that could result from the use of metaphors like being 'in limbo' (Hindle, 2000) and being 'on the road' (Lanyado, 2003). They stressed the importance of 'now' for these children and the need to identify and address their difficulties early (Hunter, 1993; Hindle, 2000; Kenrick and Tollemache, 2006; Wakelyn, 2008; 2011).

Kenrick pointed out how 'designated services for 'looked after children' sometimes offer treatment in circumstances that would often have precluded direct therapeutic intervention by mainstream Child and Adolescent Mental Health Services'. She emphasized how direct work between network building and the professional liaison required could constitute a 'matrix of care' that could be provided to support children still in transition (Kenrick and Tollemache, 2006, p. 80-81, Kenrick 2010b). She argued that technical adaptations were often required when undertaking individual psychotherapy with young children in transition; how important it was to monitor and meet children's fluctuating emotional and developmental states.

Wakelyn (2008) quoted Pynoos and Nader (1993) in their description of a 'pulsated intervention'. Using this term, Wakelyn described a form of psychotherapy treatment provided for children in transition highlighting 'a framework of six or seven individual, once weekly sessions for the child, fortnightly sessions for the parent or foster carer, punctuated by regular review meetings. Pulsated interventions aimed to work at the interface

between internal and external realities to mitigate regulatory deficits in early childhood' (Wakelyn, 2008, p. 31).

The researcher argued that CAMHS-LAC could offer similar interventions and that a children's psychotherapy group, linked with support for the children's foster carers, reviews and network meetings, could be one form of a 'pulsated intervention'. A children's psychotherapy group is an assessment tool and a treatment method in its own right; this clinical intervention could be a therapeutic response to the above concerns; a group could offer an opportunity for providing a short-term pulsated intervention and a useful framework for working.



With ideas about children in transition and the impact of transition on their development, a series of children's psychotherapy groups took place in CAMHS-LAC to explore their usefulness. Two ten-week groups and a longer term thirty-week group were undertaken by the researcher with support from a trainee child psychotherapist. All of these groups provided useful information for this research project. Running them helped the process of deciding which adaptations to Susan Reid's (1999) established group framework needed to be made to support young, vulnerable children in transition.

These groups proved to be an important learning experience for each of the children, their foster carers and professional networks. Links with the children's foster carers were shown to constitute an integral part of the process and a means of following up on the children once the groups ended. As a result of these groups, children's psychotherapy groups

became well established within CAMHS-LAC and were included in the range of services CAMHS-LAC provided. They proved a useful means of assessing children, but were also seen to have a treatment component (Reid, 1999).

Following the experience of these groups, this research project was devised to explore the experience of the children in the group and in foster care and would be part of a doctoral study.

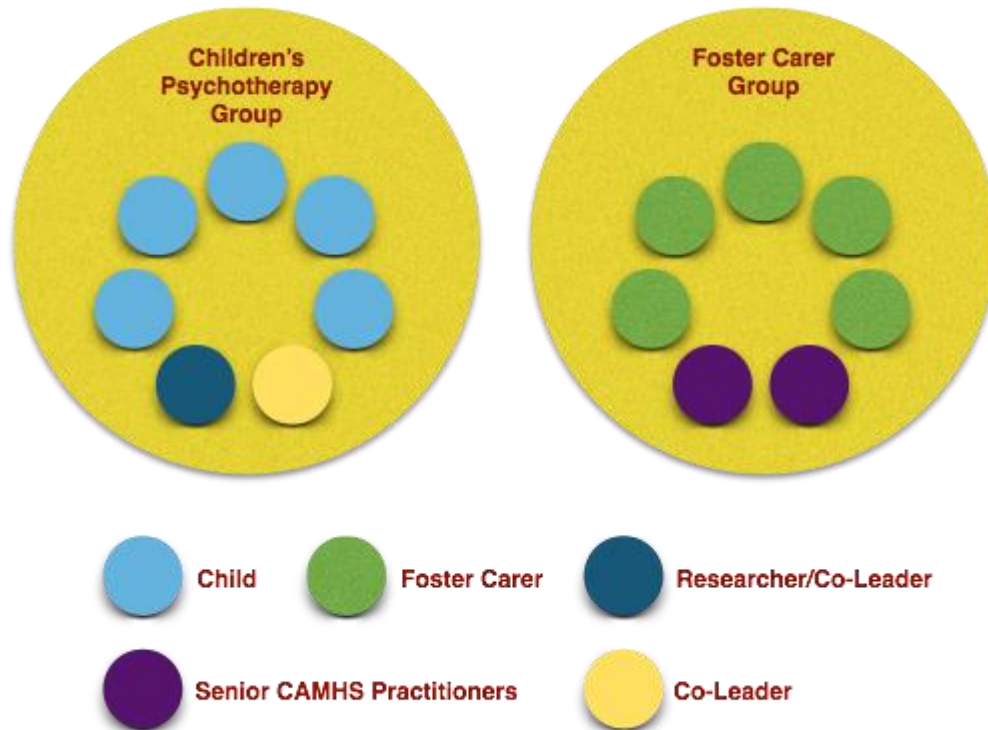
In order to focus on the children's experience, themes such as how the children managed the coming together as a group, being together and separated were considered. How this related to group processes of 'belonging' and 'becoming a group' (Reid, 1999, p. 258) was also considered. The foster carers' experiences of parenting the children were explored and a comparison made between the two sets of data.

It became clear that some priority should be given to the needs of the children's foster carers. They were likely to need support in thinking about the emotional impact of parenting the children in their care.

#### **1.1.5 The Foster Carers' Group**

It was agreed within the CAMHS-LAC team that, running parallel to the group, the children's foster carers would be offered a supportive group. The foster carers' group would be facilitated by two CAMHS-LAC clinicians. The group would offer the foster carers a space for thinking about the children and for raising any issues they wished to discuss. The foster carers were informed that the content of the foster carers' group would not be part of this research project. Exploring the links between a children's psychotherapy group and a group supporting the children's foster carers could be a useful further study but is not within the remit of this research project.

**Fig 1. The Children's Psychotherapy Group and the Foster Carers' Group**



#### **1.1.6 What Clinically Attracted the Researcher to the Research Project?**

The researcher had been following a line of enquiry in her clinical work, thinking about the experience and impact of early trauma and disruption, what Winnicott (2012, p. 197) described as the experience of 'innumerate early environmental failures' on development. She had been interested in both the effect of these failures on development generally but also on what Klein (1946) described as the internalisation of a good object and what Bion (1962a) referred to as the internalisation of the function of the containing object. Object, in this context, refers to internalised aspects of the good mother or other important carer. This is an essential aspect of development from a psychoanalytic perspective.

The question arose as to how the internalisation of a good object could be linked to the development of an internalised capacity to manage the difficult task of negotiating change. Children with early experiences of trauma and disruption are unlikely to have internalised a robust, good object that they can draw upon at times of transition and change. Is it possible, in these circumstances, to develop a capacity to manage change?

Interrupted development and the capacity to manage change was the focus of a paper presented by the researcher at the 2007 A.C.P. Conference, 'Time, timing and accommodation: "Looked after children", groups and secondary transition, the geography of a safe base' (Chester, 2007). The seeds of this research project are to be found in that paper.

The question of the impact of 'innumerate early environmental failures' (Winnicott, 2012, p. 197) on development was also in evidence in an earlier observational study the researcher submitted as part of an M.A. in Psychoanalytic Observational Studies: 'Emotional holding: Consultation and observation of a nurture group in a primary school' (Chester, 1998).<sup>5</sup>

Some of the children's experiences in this current research project, when in their families of origin, were similar to the experiences of the children in the Nurture Group.

### **1.1.7 The Focus and Rationale of this Research Project**

To explain the rationale of this research project an extract from the previous observational study is explored below.

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<sup>5</sup> Nurture Group is an educational provision developed initially by Marjorie Boxall, an educational psychologist in inner London in 1969. It uses a small group to meet unmet nurture needs that interfere with children's emotional, social and cognitive development within primary school.

## **Decorating the Christmas Tree: An Experience of Something Missing**

There were five children in the Nurture Group; Mark, Darren, Laura, John and Maria. The Nurture Group was led by the SENCo (the Special Educational Needs Co-ordinator) and a specially appointed nursery nurse. The researcher was present as an observer.

An extract of an observation:

*I went into the Nurture Group room. "We are decorating the Christmas tree," the SENCo said to me as I said hello. I pulled up a chair and sat a little distance from the group. The tree was in the corner of the carpeted area of the room. The five children in the group were all sitting together. The SENCo had a box full of new Christmas decorations. Mark and Darren were fighting over a red star decoration, even though there were several identical stars still in the box. John was sitting a little distance away holding a tree decoration tightly in his hand. The SENCo was talking about hanging the decorations on the tree. Mark and Darren continued fighting. John seemed preoccupied.*

*Suddenly I realised I could not locate Laura. I had noticed her when I joined the group. I looked around for her. I felt a sudden sense of loss and panic. I eventually found Laura. She was 'hiding' under the table in the corner. She had put her Christmas tree decorations on the floor. I felt strangely overwhelmed by Laura's ability to hide and lose herself in such a small group setting.*

*The SENCo asked the children if they could put their decorations on the tree. The children did not move. John eventually went to the tree and hung his decoration right at the back of the tree as high as he could so that it was out of sight. It took some time for the other children to put their decorations on the tree and the whole event felt very tense and difficult.*

(Observation, Week 5)



The SENCo and the nursery nurse found the experience deeply disturbing and were surprised by how difficult they had found this experience.

Decorating a Christmas tree was an activity with meaning for the SENCo and the nursery nurse. The children in the Nurture Group were not able to come together in decorating the Christmas tree. They were not able to share and were not integrated as a group. What the children in the Nurture Group brought to the experience of decorating the Christmas tree was so discordant with the SENCo and nursery nurse's own expectations that it profoundly disturbed them; this seemed to immobilise and overwhelm them both.

In the ordinary experience of the classroom, events or interactions can often occur that evoke feelings and responses that are deeply disturbing. Often these occur in situations that are keenly anticipated or seen as positive (an experience that perhaps resonates with the experience of foster carers taking 'looked after children' on holiday).

Examining the child psychotherapist's notes from the consultation session:

*Listening to both the SENCo and nursery nurse trying to put words to their experience, I talked about how disturbing I found the experience of not being able to find Laura. In that small space, sitting and observing, how could I possibly 'lose' her? There seemed to be something very painful about Laura's capacity to get 'lost' in such a small space, evidenced by my counter-transference experience of a sudden sense of panic and loss. However, there also seemed to be another difficulty. There was something enormously destabilising and deskilling about losing Laura. Laura's vulnerability and 'lost-ness' were located in me. Perhaps I had picked up the SENCo and nursery nurse's sense of failure; their loss of confidence; the collapse in their belief that they had something to give that could make a difference to these children and the pain this*

*entailed. It seemed that this disrupted both their professional identity and sense of self.*

(Consultation, Week 5)

Winnicott, in talking about the experience of residential workers in therapeutic communities and similar kinds of institutional settings (collectively referred to as 'hostels') described how the wounds inflicted by deficits in early parental care are re-visited in later relationships.

Those who work in such hostels are being all the time avenged for innumerate early environmental failures, which were not of their doing. If they are to stand the terrific strain of tolerating this and even in some cases of correcting the past failure through their tolerance, then they must at least know what it is that they are doing, and why it is that they cannot all the time succeed.

(Winnicott, 2012, p. 197)

Winnicott described what is at the heart of this research project: the impact of early environment failures on those working hard to address them and the need for further understanding.

Margaret Rustin, appears to support this when she highlights how the 'in-depth study of children's experience opens our eyes to the need to equip professionals to meet the often considerable needs of children and the absolute necessity of supporting professionals with this process' (M. E. Rustin, 2014, p. 4).

Within the Nurture Group there was clearly the need to support the SENCo and nursery nurse. There was something important about the SENCo and nursery nurse being able to share the disturbing experience of decorating the Christmas tree. Sharing experiences of the impact of Laura's projections of being lost, helpless and overwhelmed made it possible for the SENCo and the nursery nurse to consider the impact of the children's projections on them and to be in touch with their own experience. This was

both a process of discovery and a learning experience for all three professionals and led to the emergence of a space in which it was possible to begin to distinguish, elaborate and make sense of disturbing experiences.

The Christmas tree extract holds significance when thinking about the crisis of confidence foster carers can experience as they get in touch with the largely unconscious, emotional impact of parenting the traumatised children in their care. It is used to demonstrate the complex nature of the relationships being analysed, the usefulness of psychoanalytic observation and the importance of looking at complex phenomena from different perspectives.

This dual focus of observing and consulting to the Nurture Group was a response to the demands of the SENCo and the nursery nurse. The Nurture Group was a new venture and they clearly needed to have something directly seen, recognised and understood, to have another professional in touch with their experience.

As a result of its dual focus, there were conflicts and tensions within the previous observational study, but the gains that resulted made managing those tensions worthwhile. Observing the Nurture Group allowed the researcher to have an experience of aspects of the Nurture Group in a depth that was impossible had the study focussed on consultation alone.

This doctorate also aimed to have something seen, recognised and understood: the impact of 'innumerate early environment failures' (Winnicott, 2012) on, not only the children themselves, but perhaps more importantly for the children, the impact on their foster carers. It also aimed to consider the impact on the researcher and co-leader facilitating the group.

### **1.1.8 Thinking about the Structure of this Research Project**

This research project has a dual focus of enquiry and a deliberate structure and design formulated to capture the complex arena described above. Aspects of the children's relationships to others that became visible in the group are explored further in the interviews with the children's foster carers and vice versa.

It seems to me that most questions about human experience, understanding and perception should be approached from as many view-points as possible. Only then can we seek to begin to understand the complexity within which we negotiate our everyday lives and sense of self.

(Frost, 2011, p. 14)

### **1.1.9 The Dual Focus of Enquiry**

The foster carers' understanding of the children in their care is viewed from two different viewpoints: from their own experiences and that of the lens of the child psychotherapist. The idea had its origins in the researcher's experience of the Nurture Group. It was also derived from clinical experience as a child psychotherapist undertaking individual psychotherapy alongside parallel parent work and of providing parent work to other CAMHS clinicians working with individual children and adolescents. It was noticed that parallel processes often occurred in sessions with children or adolescents and sessions with their parents: similar territory was being consciously and unconsciously explored, albeit from a slightly different perspective.

The researcher had a clinical intuition that researching these parallel processes might be an important and relevant activity providing information on the foster carer/child relationship that might not be accessible by other means. This research project aimed to identify, using an Applied Grounded

Theory Research Methodology, the shape and form of the emotional territory these relationships occupied.

## **2. Literature Review**

A preliminary review of the literature was compiled in order to provide a context for the focussed literature review that follows. It took place prior to the group and the interviews with the children's foster carers. The focussed literature review was undertaken after the coding and preliminary analysis of both sets of data had been completed.

### **2.1 Searching the Literature**

The literature review was compiled from a wide variety of sources. Demographic data was obtained from background reading of government databases and NSPCC records. The main electronic databases that were used were PsycINFO, Social Care Online, PsycArticles, British Education Index (BEI) and UK Data Archives. The databases were searched using the keywords 'Foster Carers', 'Foster Parents', 'Foster Care', 'Emotional Experience', 'Emotional Recognition,' 'Emotional Immaturity', 'Emotional Disturbance' 'Emotional Regulation', 'Emotional Responses', 'Emotional Trauma', 'Emotionality,' 'Emotions' and 'Expressed Emotions'. A separate search of 'Children's Psychotherapy Groups' was undertaken. A more detailed account of how these literature reviews were conducted and processed is included in Appendix B.

Relevant government websites were searched, including: The British Association for Adoption and Fostering (BAAF), National Institute for Health and Clinical Excellence (NICE), Social Care Institution for Excellence (SCIE) and Department for Education and Skills (DfES). Websites for studies, reviews and reports on [www.gov.uk](http://www.gov.uk) were also employed. Relevant books, articles and journals (Journal of Child Psychotherapy, Journal of Infant Observation and Journal of Infant Mental Health) were read and hand searches of 'Group Analysis' and 'Group Psychotherapy' were conducted with a particular focus on children's psychotherapy groups.

Special editions of these journals focussing on children's psychotherapy groups were studied in detail.

## **2.2 Factors Leading to Children Coming into Care**

Hedy Cleaver and Steve Walker (2004) investigated the reason children come into care in detail and identified abuse or neglect (63% of all 'looked after children'), family dysfunction (10%), absent parenting (8%), family in acute stress or distress (7%), parents' illness or disability (5%), child's disability (4%) and socially unacceptable behaviour (2%). This correlates with more recent figures. Half the children received into care during the year ending 31<sup>st</sup> March 2013, came as a result of abuse or neglect (NSPCC, 2013; 2014). Carolyn Gaskell (2009) argued that ultimately all reasons for entering the care system stemmed from the child's nurturing and care needs not being met. Coming into care can be seen as an attempt to identify and address these unmet needs.

In recent years the numbers of children entering care had been falling. However, following a series of high profile cases of child death and maltreatment, the number entering care in the year beginning March 2008 rose by 9% to 25,400 (Department of Children Schools and Families, 2009). The total number of 'looked after children' rose in the UK between 2008 and 2012 from 81,315 to 91,667. As the majority of children entering care do so as a result of abuse and neglect, the influence of these high profile cases is not unsurprising (NSPCC, 2013; 2014).

## **2.3 Young Children in Foster Care in Transition**

According to Joseph Goldstein, Anna Freud and Albert Solnit:

...for some children in long-term foster homes, the experience of being fostered can be equivalent to being adopted. Despite

continuing contact with birth parents the foster home is their home, the foster parents their psychological parents.

(Goldstein, Freud and Solnit, 1973, p. 17-20).

They point to the urgency of the children's need for attachment and the difficulty for any child in sustaining extended periods of uncertainty.

'In Transition' is a term used to describe children whose need for permanence and stability has not been met. Current concerns about young children in transition have tended to centre on children in transition prior to adoption, (Rushton, 2004). There have been concerns about delays in the court system and drift within the care system itself (Brown and Ward, 2012). There has been considerable government pressure to address underlying issues and speed up adoption processes. Nicholas Wall describes some of these concerns below:

[...] the welfare of the child is paramount, indeed this principle is the cornerstone of our legislative framework. As practitioners we deal with complex issues and we must always remember that at the heart of every family there is a child - a child who every day learns, changes, grows and ultimately adapts themselves to their environment – for better and for worse.

(Wall, 2012, p. 6)

In this Wall not only places the child at the centre of professional thinking but focuses concern within the current time frame. According to Wall, every day matters. This comment is designed to address some of the complacency that can gather around children in transition.

Margaret Hunter (2001) focussed on this complacency when she highlighted how the transitional status of children in care could lead to a sense of them being 'on the road'. The metaphor suggests that the present, what is happening now, does not matter. The focus is on the next move which is viewed as real life waiting around the next corner. This denies and



dismisses both the children's difficulties and the impact of the present on their development.

Supporting this, Patricia Craven and Robert Lee (2006) highlight how stress for foster carers is compounded and at its greatest in moments of transition, with the uncertainty that prevails in the lives of many foster children and the many changes they have to negotiate:

[...] at each stage of development [...] family members have the task of adjusting to the [...] emotional climate within the family, boundaries, patterns of interaction and communication. The foster child is faced with the task of adjusting to these normative tasks while transitioning to a new home environment [...] the foster child is unsure of his or her future and lives in a world of uncertainty.

(Craven and Lee, 2006, p. 288)

Monica Lanyado (2003, p. 337), described processes of transition as 'essentially paradoxical and inevitably fraught', sometimes combining tremendous excitement with painful losses which may re-trigger traumatic memories. Debbie Hindle (2000), also pinpointed the difficulty children in foster care faced when in transition. Hindle argued that children in transition were not 'nowhere' and that more could be done to make foster placements workable. A transitional foster placement could provide a space in which children could breathe and begin to process earlier experiences. It could enable them to have a different kind of experience to promote development and transition. Foster carers might need help in setting the context of the children's presenting behaviour, both in terms of past or present uncertainties and their developmental stage.

According to Vera Fahlberg (1991), the environment in which a child lives and grows following a loss has a tremendous impact on the resolution of the child's grief process. Fahlberg places this at the heart of their circumstances.

In examining the literature in this arena it would seem that much of the focus appears to be on the experience of adoption rather than the experience of fostering. Alan Rushton (2004) in looking at work focussing on the 'adoption triangle' of child, birth parent and adoptive parent, highlighted how the roles of foster carers in facilitating transition to adoptive families (and as potential continuing attachment figures) was not mentioned. The effacement of relationships with foster carers underplays the complexity of the psychological tasks for children in care of integrating 'multiple families in mind' (Rustin, M. E. 1999, p. 51).

Sophie Boswell and Lynne Cudmore (2014, p. 5) support this view in a study that found that the 'emotional experience of the child, particularly their experience of losing their foster carers, became less prominent in people's minds' during the transition to adoptive placements. The study analysed semi-structured interviews using Interpretive Phenomenological Analysis (IPA). These interviews were with foster carers and adopters. Their study looked at the process of transition and how the ability to keep the child in mind at these times changed. Boswell and Cudmore attempt to identify and understand these changes and make suggestions as to how difficulties in this process might be addressed.

## **2.4 Foster Carers**

There is a vast volume of available literature on fostering children in care and this has been tentatively explored. It can be divided into broad categories that follow patterns of work in this area. These include: parenting approaches with foster carers that aim to reduce difficult and challenging behaviours; attachment groups with foster carers; the relationship between foster carers, social workers and children's services; foster carer support for children's contact sessions with their birth families; life story work and its role in promoting communication between foster carers and the children in their care and the parenting styles of foster carers of adolescents and its effect on their relationship. Whilst this list is

not exhaustive it gives some indication of the size of this field of literature. The focus of this research project is narrow in that it looks at literature directly relevant to the relationships between foster carers and young children; the emotional experience of fostering.

During this research project, electronic databases were searched (Appendix B) and only six directly relevant clinical papers were found on this topic. Four of these papers related to non-UK studies and one referred to the emotional experience of foster carers' biological children.<sup>6</sup> A more recent search of the electronic databases (December, 2014) revealed fifty four papers, a number of these were non-UK studies, two of the studies were on the impact of fostering on foster carers' biological children. Many of the other papers were broad based and diverse in their focus and concern and not directly relevant to this research project.

Both searches demonstrated significant gaps in the literature. Given that there are over 68,110 children currently in care in England (NSPCC, 2013) and 75% of these children are in foster care, this is rather remarkable. The literature on emotional experience of fostering is still surprisingly scant. Sinclair, Wilson, and Gibbs (2004) would appear to support this view.

According to Sinclair, Wilson and Gibbs, foster family dynamics and other issues specific to foster children in their care are sparse. Describing foster care as both a remarkable and a very ordinary activity, Sinclair, Wilson and Gibbs observed that papers and interventions that recognised the unique experience of foster children and explored foster family dynamics were lacking in the literature. Long-term foster care was described as 'largely discounted [...] the concept of foster care as a port in a storm seems to be what is left' (Sinclair, Wilson and Gibbs, 2005, p. 20). Given that foster care is the mainstay provision for the vast majority of children in care, this is a cause for concern. Discounting the experience of fostering and being fostered perhaps results from the drive by successive governments to not

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<sup>6</sup> The UK paper by Angela Hobday 'Timeholes' is discussed later in this chapter.

separate 'looked after children' from all children, not recognising them as a distinct group but making 'looked after children' merely a vulnerable category with a need for additional resources.

According to Linda Nutt (2006), the dynamics of power in relation to foster care are complex: Children's Services departments hold formal powers to register or de-register carers and to place or remove children, but are also dependent on foster carers to look after children in their families. Nutt's study of foster carers' views of their experiences found that foster carers frequently relinquished 'personal agency' and are 'affected by a sense of powerlessness that means that they allow social workers to take decisions that affect their personal and private lives' (Nutt 2006, p. 58). She comments that foster carers are part of the social services bureaucracy but their place in it is ambiguous. In contrast to many European countries, they are known as 'foster carers' rather than 'foster parents'. They do not share professional authority with social workers. This links to what Jenifer Wakelyn (2010) has described as the marginalisation of foster carers.

Wakelyn emphasizes how foster carers have neither professional nor parental authority over the children in their care and draws attention to how this can result in a loss of confidence in their parenting. She points attention to the split that occurs with emotionality being located in the foster carers, not in the professional network. Wakelyn looks in detail at the impact of this, focussing particularly on the professional networks around children and their foster carers. Wakelyn's work highlights how it is not only the foster carers who are marginalised but the emotional experience of the foster children themselves is also marginalised. It is discounted and denied within the literature.

Nutt (2006) argues that the practice guidelines of the 1989 Children's Act<sup>7</sup> added to demands made of foster carers. She highlights the precarious balancing of private and public tasks negotiated by foster carers at the

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<sup>7</sup> This literature review does not review the legal framework around children in care in transition. This is outside the remit of this research study.

interface of several conceptual worlds, with the result that their status is ambiguous, their task full of paradoxes and their lifestyle conflicted.

Carers appear to live in a daily world of contradictions grappling with the encouraged formation of loving, intimate attachments but similarly recognising the temporal and professional nature of their care.

(Nutt, 2006, p. 76)

Nutt highlights the increasing bureaucratisation of the fostering process and emphasizes how caring and worrying are interrelated concepts.

## **2.5 Relevant Research Projects**

According to Lauren Pickin, Vivienne Brunsden and Rowena Hill (2011), despite the wealth of literature on foster care, limited attention has been given to investigating the subjective everyday experiences of the foster carers themselves. Pickin, Brunsden and Hill undertook research into the emotional experience of foster carers using the 'photovoice' method.<sup>8</sup>

Pickin, Brunsden and Hill used Interpretive Phenomenological Analysis (Smith and Osborn, 2003) to study the resultant visual data. Five superordinate themes emerged (angry frustration, promoting security and well-being, an ambiguous life, the impact of the children and coping). Although the sample size was small (5) and the report brief, the five themes introduced multi-layered aspects of the emotional experience of foster carers in a way that vividly sets the context of this research project.

In a study that would seem to bridge the foster carer/adopter dichotomy, Jenny Kenrick (2009; 2010b) looks at 'concurrent planning'. Concurrent Planning (CP) is the process of placing very young pre-verbal children into

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<sup>8</sup> The Photovoice Method is a group analysis method that combines photography and grassroots social interaction. It is used to reveal real life experiences and empower marginalised groups.

foster placements that have the potential to become adoptive placements. Children are placed before any court decision has been made. The study focuses on twenty-nine children (Kenrick, 2009, p. 5).

Kenrick's study focussed initially on 'the impact on the infants of the intensive contact with birth parents which is intrinsic to concurrent planning' (Kenrick, 2009, p. 5). This was followed a year later with a paper on the impact on the CP foster carers (Kenrick, 2010b, p. 38).

Kenrick interviewed CP foster carers using an open questionnaire. They were 'given space for the telling of their story, much as a mother might tell the story of the birth of their baby' (Kenrick, 2010b, p. 39). According to Kenrick, many of the interviews had the same emotional intensity. The carers' stories told the tale of how the babies joined their families (and how only one went home).

Kenrick's study suggested that there was not only much emotional experience to be gathered but that the CP foster carers might need help in processing this. In particular, Kenrick identified a temporal element to this processing, highlighting how hard it was for many CP foster carers to remember the exact age of the child when a particular difficulty may have emerged. For Kenrick, it seemed to be the emotion aroused by the memory, rather than the length of time that had elapsed which seemed to be significant.

Kenrick's study is set in the context of the infant's stage of development; the difficulty with separation at 6-9 months. It highlighted how the infants coped with long journeys in relation to contact. It also illustrated examples of these transition difficulties which could, according to CP foster carers, seem pervasive or long-term for these children.

Wakelyn (2011) undertook a different type of study of a foster child in transition to adoption. This was a clinical research study of a therapeutic observation of a baby boy in foster care pre-adoption. Her study followed the boy over a ten-month period until he was placed for adoption at the age

of 13 months. She emphasized that ‘the experience was valuable, not only because of the ‘paucity’ of research on this age group, but also because the baby had not undergone further placements since being taken into care on the day of his birth’ (Wakelyn, 2011, p. 284).

In Wakelyn’s study there was an absence of the compounding factors that are often present with young children entering care due to maltreatment, many of whom have undergone multiple placement moves within their family of origin or since coming into care (Wakelyn, 2011).<sup>9</sup>

Using a Grounded Theory Research Methodology to explore two different types of data, similar to the task in this research project, Wakelyn analysed the data from her clinical intervention (therapeutic observation of an infant) and compared the data with data obtained from semi-structured interviews with the baby’s foster carer and social workers.

Wakelyn identified four different kinds of organisational dynamics in relation to the infant in foster care. The first of these was driven by development, the other three were driven by trauma. For Wakelyn, trauma-led dynamics increased the risk of foster carers and professional networks losing contact with children’s experiences. In addition foster carers, social workers and the professional network could be out of touch with the impact on them of their own experiences. Wakelyn’s study highlights the need for specialist training to support ‘emotionally responsive care giving to young children in care’, advocating further research into this area (Wakelyn, 2011, p. 280).

Both Kenrick’s (2009; 2010b) and Wakelyn’s (2011) studies appear to represent exceptions to the experience highlighted earlier in the literature of the effacement of relationships with foster carers in that they both provide

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<sup>9</sup> Wakelyn’s study followed a therapeutic observation of the baby. Therapeutic observation is a clinical intervention or treatment method that is derived and builds on infant and young child observation. Esther Bick (1964) introduced infant observation as a core component of child psychotherapy training and it is now part of many therapeutic and social care trainings. Therapeutic observation differs from infant observation in that it is undertaken as an intervention by an experienced observer whose role is proactive as well as receptive and carried out in the context of a clinical need. Appropriate supervision is integral to its provision.

'rich, thick description' (Rustin M. J., 2009). Both studies detail the emotional experiences of foster carers and the children in their care, particularly at times of great transition, coming into care and moving to an adoptive placement.

## **2.6 The Literature on Children's Psychotherapy Groups**

According to Susan Reid (1999):

...most child psychotherapists prefer to work with children individually rather than in groups. Whilst all child psychotherapists work with the natural group of the family, child psychotherapists it would appear, spend less time working with children in groups.

(Reid, 1999, p. 247)

Susan Reid argues that this is reflected in literature, both in the UK and internationally.

Searching the literature in relation to children's psychotherapy groups using a psychoanalytic frame revealed that literature relevant to this research project was sparse. At the beginning of this research project an extensive search of the literature revealed a large volume of UK and international literature. However a closer inspection of the literature revealed only six papers relevant to this research project. A more recent search following the same stringent analysis discovered a further six papers (Appendix B).

Whilst individual psychoanalytic psychotherapy is an established treatment for children and adolescents with a wide variety of difficulties, treatment in psychoanalytic psychotherapy groups is less widespread.

Children's psychotherapy groups have advantages and disadvantages, (Reid, 2007). What becomes visible in the context of the group can be both a strength and a weakness.



According to John Woods, (1993):

When patients are introduced to each other the therapist cannot predict what transpires. The therapist has no control over the significance each patient may have for another. The balance of power shifts dramatically.

(Woods, 1993, p. 63)

Both Woods and Reid in different ways draw attention to the need for structure and management.

Despite the difficulties in management, Susan Reid, emphasizes how children's psychotherapy groups have enormous potential as they explore relationships as they present in the here and now of the group setting; relationships between group members, between individuals and the co-leader or leaders, and between the group as a whole and the leaders. These multiple relationships are treated as indicative of other levels of relating, for each member of the group. Susan Reid stresses how 'all communications from the individual to other group members and to the group therapists are understood to have significance at the transference level' (Reid, 1999, p. 253). Understanding the unfolding transference is key to understanding the group.

The contribution of Susan Reid to this area is considerable and is highlighted throughout this thesis, particularly in the methodology section. It has been incorporated in the Research Design Section rather than here because of its influence on the structure of both the research project and the structure of the children's psychotherapy group.

## **2.7 Group work with Children - Themes from Groups**

Hamish Canham was a Co-Convenor of the Groups Workshop at the Tavistock Centre and worked with Susan Reid applying his sharp psychoanalytic mind to thinking about psychoanalytic processes in groups. His particular interest in the experience of 'looked after children' and the processing of trauma resonate in the two papers he wrote on group work with children, a paper jointly written with Louise Emanuel, 'Tied Together Feelings' (2000) and his paper on 'Group and gang states of mind' (2002).

Canham and Emanuel (2000) describe the powerfulness of their first experience of a children's psychotherapy group and of working together in the context of that group. They highlight the importance and significance of group structure and the group setting and define this as group coherence. Drawing on the idea of a 'working together couple' in relation to the group's co-leaders, they discuss in detail how the children used them, the nature of the children's projections and their different attempts to split the couple and render them useless. In the longer-term the children were able to benefit from the two co-leaders particularly as a co-operating, supportive, working together couple was often a new experience for these children.

In his second paper, Canham pointed out how the 'psychoanalytic approach to group processes tend to use individual psychoanalytic perspectives with Wilfred Bion's (1961) work on groups being one of the few notable exceptions.' (Canham, 2002, p. 113)<sup>10</sup>

In this paper, Canham draws on psychoanalytic theory but uses examples taken from analytic group therapy with children to illustrate this. He explores both group and gang states of mind and argues that these have internal and external components. Canham links a gang state of mind with Klein's paranoid-schizoid position and a group state of mind with Klein's

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<sup>10</sup> Wilfred Ruprecht Bion made a renowned contribution to group work in thinking about the 'work group' and Basic Assumption groups. This is ingrained in the thinking of child psychotherapists undertaking group work and is only referred to briefly because of the limited word count of this thesis.

depressive position (Klein, 1940). Klein's two concepts are described below.

According to Canham, these two states of mind are present from birth and persist throughout life. They emerge in different situations. Canham distinguishes between a group state of mind and a gang state of mind. A gang state of mind is more akin to paranoid-schizoid functioning (Klein, 1946). Canham draws on the work of Rosenfeld (1971) who describes this state of mind as destructive narcissism, leading to a destructive organisation. Rosenfeld argues that ganging is used to solve the pain of ambivalent feelings. Within the personality, this is achieved by imposing a reign of terror on the vulnerable parts of the self. This 'ganging' within the mind drives children towards 'ganging' in the external world, and can turn children into nasty, scheming bullies. In gang behaviour, the reign of terror is directed towards other groups. A gang is anti-thought, anti-parents and anti-life (Canham, 2002; Youell and Canham, 2006).

In sharp contrast a well-functioning group or individual in a group state of mind can tolerate, explore and value difference, permit alternative viewpoints and the tensions and potentials for creativity this allows.

## **2.8 The Paranoid-Schizoid Position and the Depressive Position**

Canham drew on the work of Klein (1946) and a description of the paranoid-schizoid position and the depressive position is included here to assist the reader. Klein identified two distinct states of mind: the 'paranoid-schizoid' position and the 'depressive' position. Klein saw the paranoid-schizoid position as the state of mind of very small infants who did not as yet perceive themselves as separate or distinct from others. This state of mind was fused, confused and fragmented and in touch with only the infant's desperate need for survival. Fear and anxiety of a catastrophic nature, what Bion (1962b, p. 96) termed 'nameless dread' reigned. The infant's need to defend himself against these primitive fears with illusions of

omnipotence, of not needing anyone, of needing to fight or take flight; his need to protect himself from others was paramount. Feelings of hatred and envy dominate.

In contrast, the depressive position was a state of mind where dependence was recognised, accepted and tolerated; feelings of love and concern for others predominate. The nature of anxiety in the depressive position was very different from that in the paranoid-schizoid position; fears were relational and the loss of the loved object or of having hurt or damaged the object of one's affections and passions was the dominant anxiety. There was a desire to repair the damage done.

The move from the paranoid-schizoid position (where these primitive splitting processes dominated) to the depressive position (where the infant's hostility could be owned and withstood because of his relationship with his mother) is integral to the infant's development. In the shift from the paranoid-schizoid position to the depressive position there is less splitting. The infant is able to develop the capacity to tolerate states of ambivalence in which good and bad feelings can be held together with some degree of stability (Klein, 1957).

## **2.9 Groups and Shifts between the Paranoid-Schizoid and Depressive Positions**

In a paper on children's' psychotherapy groups that concentrates exclusively on latency-age children Akasha Devi and Edwin Fenn (2012) described how they conducted a small, practice-based, qualitative research project using a thematic analysis as described by Braun and Clarke (2006, p. 78). They built on the extensive work of Susan Reid (1999) and Hamish Canham (2002).

The children in their group were not looked after but all had parents with severe mental health difficulties. These parents were provided with a group

of their own. Sadly, not all of the parents were able to sustain their involvement in this group. The children's group began with five members and, over the course of the year, lost two of its members. Devi and Fenn (2012) focussed on the impact of the loss of these two members and highlighted how interestingly the difficult experience of losing two group members appeared to strengthen the connections between the three remaining children as they gradually moved towards accepting the new situation. These children were then able to share some of their family experiences of loss and pain with each other in a sympathetic way, highlighting a move from the paranoid-schizoid position to the depressive position.

Devi and Fenn followed the micro-movements from the paranoid-schizoid position to the depressive position (Klein, 1946, p. 43). Their work described in detail how the processing of one loss or losses (the two children in the group) can facilitate the processing of other more intrusive, less accessible losses. This work echoes that of Juliet Hopkins (1986) who demonstrated how psychoanalytic psychotherapy can help in the processing of trauma and how one attachment can facilitate the development of another.

Devi and Fenn tracked aspects of group dynamics in relation to acknowledging the need for parents. Fighting for survival in a gang-like way, the children often excluded the group leaders from interactions or ignored them in a hostile way, treating them as of no use. They tracked the movement of the gang-like states of mind to states of mind that could acknowledge the need for adults and parents.

Early trauma and disruption interferes with development and the move in and out of paranoid-schizoid and depressive functioning. Focussing on these shifts was helpful and provided a background resource in thinking about the children's psychotherapy group. 'Looked after children' often have difficulty in achieving a space for thinking that permits the achievement of the paranoid-schizoid position. The infant's projections

need to be taken in and contained by a receptive and predictable mother or carer. If the capacity for projection is lost due to neglect and trauma a psychotic state can predominate and it can be an achievement to gain or regain the paranoid-schizoid state. Looked after children can often have difficulty in accepting adult concern and parenting in their foster family settings (Rustin, M. E., 1999).

## **2.10 A Useful Outcome Study that has Relevance to this Research Project**

A randomised control trial, by Judith Trowell and Israel Kolvin (1999) has particular relevance to this project. Trowell and Kolvin undertook a psychotherapy outcome study of sexually abused girls. This was a comparison study, comparing individual psychotherapy with psycho-educational group psychotherapy. Girls aged between 6 and 14 were randomly allocated to either individual psychotherapy or group psychotherapy. The individual psychotherapy offered thirty sessions and the group psychotherapy offered twelve to eighteen sessions. This was thought to be the minimum time limit for treatment to be effective. Both treatments were manualized and the research process was clinic based. The hypothesis postulated was that the girls would benefit most from individual psychotherapy and that this would change their relationships and views of themselves and that group psychotherapy was more likely to help the girls with their social skills and social relationships.

There was a criteria for entry into the study which was that contact sexual abuse needed to have taken place and the girls needed to have made disclosures within the last two years. In selecting girls for the study, some girls were seen as too troubled and some girls and their carers withdrew from the study before it commenced, 75% were living with single mothers and 25% were in foster care. The study highlighted sexual abuse dynamics within institutions which would be useful to consider in the light of this research project. The staff involved received training and supervision.

Both treatments were found to be effective:

Individual psychoanalytic psychotherapy appeared to have a preferential impact on the PTSD scale dimensions of re-experience of traumatic event and persistent avoidance of stimuli compared to group treatment. Generalised anxiety disorder proved the most liable to remit, depressive disorder and separation anxiety disorder were less likely to remit, although two thirds of those with depressive disorder and half those with separation anxiety disorder no longer had this disorder a year on.

(Midgley and Kennedy, 2011, p. 10)

## **2.11 Psychoanalytic Literature on Play**

The psychoanalytic literature on play is extensive and the researcher has made decisions on which areas to explore. The literature review has focussed on areas of work with direct relevance to the research project itself.

Sigmund Freud, in his 1917 paper, 'Beyond the Pleasure Principle', described a game he had observed whilst staying with a young boy (of 18 months) and his parents. This boy was a compliant 'good boy' who loved his mother but did not protest at her absence. Freud described his process of discovery in understanding aspects of this boy's play. The boy would throw objects into one corner of the room and then actively seek to find these. The boy had few recognisable words, but in talking with his mother, Freud and she were convinced he was using the word 'fort', German for 'gone' and that he was playing at things being gone or missing.

Freud's interest in this game came to a climax when Freud observed a game the boy played, now famously known as the cotton reel game or 'fort da'. The boy flung a wooden reel tied to string over the side of his cot and retrieved it. The reel disappeared into the sides of his curtained cot, the boy

exclaimed his o-o-o- (fort/gone) and then pulling the reel back into view, hailing its reappearance with a 'da' (here). This was the completed two act game; Freud had previously only seen the first act.

According to Freud, the game was tirelessly repeated but the greatest pleasure was attached to the second act. Freud argued that what the boy felt in relation to his mother's absence had to be enacted again and again before the boy could include his mother's joyful return. The purpose of the game lay in being able to include this latter part of the sequence.

Freud divided the game into two parts. The first part was a repetition of the experience of loss. The second and important part was the boy's anticipation of his mother's return and his capacity to use play, initially to explore the experience of missing and then to explore both missing and joyful return. Young children with experience of early trauma and disruption are unlikely to have sustained experience of predictability in relation to their mother's safe return. Added to this, their anxiety is likely to have interfered with the development of their capacity to play, particularly in relation to the theme of loss. An interference with the development of a capacity to play is likely to have significant implications for their development generally.

Melanie Klein (1927) equated the young child's capacity to play with the adult's capacity to dream in relation to psychoanalysis. In the 'Psychoanalytic Play Technique' Klein highlighted how:

...my work with both children and adults, and my contributions to psycho-analytic theory as a whole, derive ultimately from the play technique evolved with young children. I do not mean by this that my later work was a direct application of the play technique; but the insight that I gained into early development, into unconscious processes, and into the nature of interpretations by which the unconscious can be approached, has been of far-reaching influence on the work I have done with older children and adults.

(Klein, 1955, p. 122)



Klein believed that children were much more closely in touch with their unconscious and that using toys rather than words was less invested with anxiety. Her play technique sought to provide the setting that would allow the child to express themselves through toys and play. Klein aimed to analyse children in the same way that adults were analysed, attending to the meaning of play, the transference and the unconscious phantasies the child expressed. Play was a vehicle for accessing meaning and support for the child.

Klein's view supports that of Freud, that play has symbolic meaning and from this it is possible to interpret the child's unconscious preoccupations. The play technique of understanding and working with children's unconscious phantasies is utilised in working with children in children's psychotherapy groups<sup>11</sup>.

In thinking about children who are unable to play, Winnicott (1971) concluded that interpretation was not helpful and could be confusing for the child. In these instances Winnicott emphasized the importance to the child of naming their emotions, intentions and body parts (Home and Lanyado, 2015). In the context of the research group, all of the children in the group, at times, were unable to play and Winnicott's emphasis on the importance of naming emotions, intentions and body parts was made use of extensively at these times.

## **2.12 The Psychoanalytic Literature in Relation to Early Development**

This section of the literature review engages briefly with psychoanalytic literature in relation to early development. Relevant literature is explored in relation to early trauma, disruption and loss, looking specifically at resulting

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<sup>11</sup> There are extensive references in the psychoanalytic literature in regard to play. It is beyond the scope of this research study to review them all. For the purposes of the study of children's psychotherapy groups it is important to be aware that play has symbolic meaning. The extracts included here refer to play as used in the context of the children's psychotherapy group.

gaps in development, their impact on relationships and how these gaps might be addressed.

Considering the earliest stages of development, Lazar, Ropke and Ermann (1998, p. 22) describe an observational study of a premature baby boy in a Special Care Baby Unit (SCBU). Their paper focuses on the central problem of: 'being and staying alive, becoming a person and beginning to think'. Observing and thinking about the premature baby's fight to just be, to breathe, they were observing the development of an internal capacity, an inner mental space. In the initial stages of the observation it was difficult for the observer to process the experience. Later in the observation, the observer felt the baby came to know she was there. Using his 'ears as feelers' he could in some way sense the observer's presence. There appeared to be a contact which enabled him to stretch more comfortably.

At this time the observer began to find it hard to leave him. She felt she shielded him from the noisy environment in the SCBU. Others too began to notice his responses to change. Prior to this, the observer had found the observation difficult. She had been unable to stay with the experience and think. Observing the baby now seemed easier. The observer could begin to think and remember without the need to write down, at the time, what she saw. Here we perhaps see the reciprocal relational aspects of development and the beginnings of object seeking, the beginnings of relatedness and the seeds of relationship. Lazar, Ropke and Ermann (1998) look at the development of an internal mental space. Their account conveys the emotional experience of the observation and perhaps something of the baby's experience and the nature of thinking.

On the basis of her observations of infants and those of her students, Esther Bick (1968) described how at the beginning of life the attentions of the mother are experienced as being equivalent to providing a psychic skin to hold together parts of the personality, equivalent to the actual skin providing containment for the body. Over time, the mother's capacity to hold the infant together within a psychic skin is introjected and this process

gives rise to three dimensionality; to the notion of internal and external space.

A number of defences against failures of skin containment resulting from inadequate early provision or from later traumatic experiences have been identified. Bick referred to the formation of a 'second skin' via 'skin toughening' a 'rhinoceros hide' defence that wards off fears of disintegration by forming a tough impermeable barrier around the self. Where toughening becomes entrenched, dependence on attachment figures is replaced by pseudo-independence. The infant now seeks containment primarily through visual or auditory fixation on inanimate objects, or through a focus on his own vigorous movements. The consequences for communication and relatedness are evident.

Meltzer (1975) developed the concept of 'adhesive identification' with Bick (1968) whilst she was observing second skin formations in babies who failed to achieve a trusting dependence on their mothers/carers. Linked to the lack of development of an internal space, in adhesive identification there is no separation, no separate space for thinking and more extreme primitive anxieties reign.

Meltzer made a useful distinction between a child's excessive use of projective identification and adhesive identification. 'While the child in projective identification will experience the refusal of his tyranny as a threat to his omnipotence and reduplicate his efforts, a similar refusal in the case of adhesive identification produces collapse, as if torn off and thrown away by the object' (Meltzer, 1975, p. 229).

Meltzer's distinction identifies the different relational components of these two concepts. Projective identification involves a determined link to the object; adhesive identification involves a life preserving sticking. Both are clearly defensive.

Winnicott's (1965) notion of the 'false self' is relevant here. Freud (1917) identified a part of the self that was central and linked to instincts and drives and a part of the self that was turned outwards and related to the world. Building on the work of Freud, Winnicott developed the idea that a part of the self could separate and used the concept of a 'false self' to describe this. He thought that this occurred in earliest infancy when the infant was in his most unintegrated state.

According to Winnicott, the 'good enough mother' meets the omnipotence of the infant and makes sense of this; if she does this repeatedly the infant develops a 'true self' that integrates parts of his personality. The 'not good enough mother' fails to meet the infant's gesture and substitutes her own gesture that is only made sense of by the infant's compliance (Winnicott, 1965, p. 145). This can lead to major gaps in the infant's development that leave important aspects of him unintegrated.

### **2.13 The Internal World**

One of the most central concepts in psychoanalytic theories of early infant development is Klein's (1946) notion of the 'internal world'. The 'nature of this internal world and the manner of its formation' has been the focus of much psychoanalytic inquiry (Shuttleworth, 1989, p. 33). This extensive inquiry has led to the hypothesis that the development of the processes of internalisation in early infancy is characteristically different from later forms of internalisation that use symbol formation and language.

Klein's work with very young children graphically demonstrates the concrete way young children can experience, what she describes as, 'internal objects'. Internal objects are internal representations of significant figures (key relationships) in the child's external world whose qualities will have been influenced by what the child has made of his or her experience (Rustin, M. E., 1999, p. 52). In the ordinarily protective and supportive context of important key relationships within the family, the infant's picture

of the world is slowly and gradually pulled together, 'integrated and organised' (Rustin, M. E., 1999, p. 52).

Before exploring aspects of the internal world more fully an area of Winnicott's work is discussed that links the development of the infant's internal world with the literature discussed above.

Winnicott (1953; 1958) developed the concept of the 'transitional object', the infant's first 'not-me' possession that helped infants negotiate the task of separation (Winnicott, 1953, p. 1). Winnicott linked this with Klein's (1946) concept of the 'internal object', emphasizing how a lively internal object (the breast, a mother figure, general environmental care) needed to be in place for a child to be able to use a transitional object. To use a transitional object, the item/possession needed to be linked with the lively internal object it represented or stood in the place of.

Winnicott (1960) emphasized how following a persistence of failure of the external object (innumerate early environmental failures), the internal object itself could fail to have meaning to the infant, and this could lead to the transitional object becoming meaningless too.

In ordinary development, two pictures of mother begin to emerge: a good, trustworthy mother with attributes that gratify the infant and a bad, unreliable disappointing mother (Rustin, M. E., 1999, p. 52). Psychoanalysts describe this process as 'splitting' and view this as a fundamental achievement in psychological development. Splitting makes it possible to organise our mental life in a differentiated way. The separation of good and bad, love and hate, right and wrong becomes possible. These are primary polarities by which we order experience (Klein, 1946).

According to Klein, this shifting process is a constant one and some infants are better equipped to manage this. 'Infants whose capacity for love is strong feel less need for idealisation than those in whom destructive impulses and persecutory anxiety are paramount' (Klein, 1957, p. 192).

Klein hypothesised 'that we move back and forth between the two positions, described throughout the lifespan. A particular state of mind being influenced by the internal and external pressures faced at different periods' (Devi and Fenn, 2012, p. 321).

Although Klein is often predominantly linked with internal world factors she also considered the impact of the external environment.

According to Klein:

There is no doubt that if the infant was actually exposed to very unfavourable conditions, the retrospective establishing of a good object cannot undo bad early experiences. However, the introjection of the analyst as a good object, if not based on idealisation has, to some extent, the effect of providing an internal object where it has been largely lacking.

(Klein, 1957, p. 234)

In this instance Klein is drawing attention to the long-term impact of unfavourable conditions. She is also describing the way in which analysis can, in a limited way, mitigate against this.

## **2.14 Projective Identification and Containment**

In Klein's (1946; 1957) original conception of projective identification, she described two processes that enhanced communication between the infant and the mother and further development (projection and identification). She brought these two processes together when she identified the concept of projective identification. This is the most widely used Kleinian concept yet there remain difficulties in defining it. It is employed in a number of different ways and has communicative and evacuative functions Bion (1962b) developed Klein's concept of projective identification, exploring the

communicative aspects between mother and infant further in order to establish his concept of 'containment'.<sup>12</sup>

Containment refers to the mother's capacity to receive, through projective identification (Klein, 1946), primitive elements of her baby's experience and to make the contained elements available to the baby to take back, in a modified form, into his/her awareness. In this way the baby is more able to understand his experience and the concept of containment is therefore inextricably linked to the task of understanding.

The prototype of containment is the infant's state of bliss when connected with the breast or bottle/breast substitute and held securely within his mother's arms. This state of loving attention can quickly give way to disintegration when the infant is disconnected from the source of life. This is the epitome of the terror of separation. Bion (1966) calls this state 'catastrophic anxiety', arguing that it threatens to overwhelm us whenever we face change.

## **2.15 The Holding Environment**

According to Winnicott (1963), in the infant, innate maturational processes of development occur within a setting of dependence. The infant's state 'of not being separated, of not being integrated, of not being related to body functions, of not being related to objects, belongs to immaturity'. The experience of these states of immaturity are very real for the infant and the problem, as Winnicott saw it, was 'how does the infant survive such conditions?' (Winnicott, 1963, p. 595).

In relation to these states of immaturity, 'processes of integration, and separating out, of getting to live in the body and of relating to objects' are all seen as matters of achievement. Winnicott saw the mother's task as one

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<sup>12</sup> This research project would have benefited from a more detailed exploration of the concept of projective identification but this was not possible given the word limit of the Doctorate.

of introducing the world to the infant in small doses, giving the infant time for the developments and extensions in his capacities that come with maturity. In this process the infant's state of dependence is given central place: 'If steady growth is facilitated, then omnipotence and omniscience are retained, along with an intellectual acceptance of the reality principle' (Winnicott, 1963, p. 595).

The management of anxiety is fundamental to the process described above. It is by the mother's (or primary carer's) minute-to-minute care that the basis of the infant's future mental health is laid down. This is an enormous parental task (Winnicott, 1963).

## **2.16 Considering the Two Concepts Together – Further Development**

According to Ronald Britton (1998), in ordinary development, the concepts of 'containment' and the 'holding environment' are often seen as interchangeable, emphasizing different aspects of a similar process. He argues that in ordinary good enough circumstances these concepts are the same. An experience of being contained is linked to being physically held; and an experience of being physically held is linked to being understood.

This has links with Klein's (1946) notion of the infant's need for love and understanding. However, in his work with borderline patients, Britton found the experiences of being contained internally, and physically held externally, were separate and not necessarily linked.

It is argued in the context of this research project that for 'looked after children' who have experienced early trauma and are still in transition, the experience of being contained internally and physically held are often separate and not linked. The considerable gaps in their development are likely to make the simultaneous experience of being held externally and contained internally rare. They become two distinctly separate tasks. One



is to establish a containing relationship and the other is to create a holding environment. Young 'looked after children' are often in the position of trying to provide themselves with both, parenting themselves on the one hand and controlling their environment to make it predictable on the other. In these circumstances any change is likely to be experienced as very exposing. According to Britton (1998), both structure and understanding are vital components in creating a triangular space. The children's psychotherapy group aimed to provide a safe third space for potential development for each of the children.

The work of Thomas Ogden (2004) is helpful in thinking further about the concepts of the holding environment and containment being two separate functions for children with early experiences of trauma and disruption. Ogden also drew attention to the confusion that exists between Winnicott's concept of the 'holding environment' and Bion's concept of the 'container-contained'. According to Ogden, Winnicott's 'holding' is primarily concerned with being and its relationship to time. Containment addresses how we process lived experience and what occurs psychically when we are unable to do psychological work with that experience (Ogden, 2004, p. 1354).

## **2.17 Concentric Circles of Containment**

Claudia McLoughlin (2010), in a paper entitled 'Concentric circles of containment' describes a way of thinking about and working with vulnerable children for whom the provision of containment and a holding environment is both a struggle and an on-going long-term task. Concentric circles of containment provide a useful way of thinking about and combining these two tasks. McLoughlin's model of placing the child at the centre of wrap-around support has been utilised in this research project. This model of containment has similarities with the containing environment of a children's psychotherapy group, something McLoughlin is familiar with.<sup>13</sup>

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<sup>13</sup> Claudia McLoughlin is Akasha Devi, Akasha Devi is her other name.

## 2.18 Transition Facilitating Behaviours

Pamela Berse Sorenson (2004), in a paper exploring primitive anxieties, describes behaviours provided by the mother, which she terms 'transition facilitating behaviours'. These behaviours are both conscious and unconscious and enable the mother to support her infant internally and externally. Sorenson explores object relations theory and attachment theory.<sup>14</sup> However, more importantly for this research project, the particular form of maternal behaviour she describes brings together the two processes described above (containment and the holding environment) as they occur in ordinary development. Sorensen's focus is on containment but she sees these transition facilitating behaviours, not as embodying the process of containment *per se*, but providing an indication of when the process of containment is occurring.

Transition facilitating behaviours focus on the infant's internal state and the impact of change. The mother is in touch with both the infant's internal state and the external environment, anticipating how the external environment might impinge on the infant. The infant's sensory experiences are mediated by the mother's physical activity. For example, the mother adjusting 'the blinds in the living room before carrying in her baby from the dark bedroom'; a mother 'splashes some bath water on her baby's arm before easing him into the bath' (Sorensen, 2004, p. 122). This is an example of the mother introducing her baby to the world in manageable chunks (Winnicott, 1987).

Transition facilitating behaviours are 'protective in function and triadic in nature' (Sorensen, 2004, p. 122). The first element is the mother's accurate anticipation of the impact of change on the infant. The second element is the mother orientating herself simultaneously to the subjective state of her infant and the third element is change itself. These behaviours have an orientating and cushioning function for the infant and build on Daniel

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<sup>14</sup> Consideration of attachment theory in greater depth is not within the remit of this research project.

Stern's (1985) work on maternal attunement and Beatrice Beebe and Frank Lachmann's (1988) work on accurate matching between a mother and her baby in terms of rhythm, distance, and intensity of behaviour.

Sorenson's ideas about transitional facilitating behaviours have been used extensively in the children's psychotherapy group. These ideas of ordinary development need to be held in mind whilst thinking about the impact of trauma discussed later in this literature review.

Sorenson focusses on a congruent state of mind and argues that a congruent state of mind is a vital internal and external component to the development of a 'secure base' (Bowlby, 1980). There is a similar internal and external component to the internalisation of a good object. On the process of internalisation, Gianna Williams (1997b) argues that there is a need to establish the internalisation of a containing object before one can let go of an external one:

There is abundant evidence that such a sequence is necessary in development both in our observational and clinical experiences. A child who is beginning to walk will only let go with one hand after he has taken a grip on a reliable object with the other. I think we can observe a similar process in terms of the transition from external to internal objects. The possibility of letting go of an external object, without experiencing excessive anxiety or developing crippling defences, is subsequent to the internalisation, or at least the beginning of internalisation, of a reliable internal object.

(Williams, 1997b, p. 88)

Williams' (1997b) extensive work in this field on internal processes (see below) and 'double deprivation' has been fundamental to our understanding. The term double deprivation relates to the child's link with an internal, abandoning, neglectful parental figure whose attributes are projected onto external figures in the child's external world.

The concept of double deprivation is particularly relevant when thinking about traumatised children. Applying the concept aids our understanding of the often difficult and confusing aspects of these children's behaviour. In the context of double deprivation this behaviour can be seen as a re-enactment of what the child experiences others have done to them. The child is in fact treating others as they experienced others treating them. Anna Freud's (1992) concept of 'identifying with the aggressor', has obvious links to this. This is a universally recognised defence mechanism. It is used to describe simple attempts to master anxiety about frightening lived experiences. Anna Freud explored its role in the development of the superego. She described how becoming the aggressor was an attempt to deal with the anxiety and narcissistic mortification caused by painful incidents and events that could feel like an attack. It has links to play and active mastery.

An extensive body of psychoanalytic work exists that is relevant in this area. Klein's (1946) work on persecutory anxiety, projective identification and splitting, Bick's (1968) work on unintegrated states and second skin formation, Meltzer's (1975) work on adhesive identification, Williams' (1997a) work on internalisation, Rosenfeld's (1964) work on gangs, Canham's (2002) work on groups and gangs. The research project will draw on these works.

## **2.19 The Influence of the Past on the Present**

The structure of the internal worlds of children who are later fostered and/or adopted are influenced in many ways by their earlier accumulative experiences of trauma and disruption. These atypical life experiences can have a striking impact upon the nature of their internal worlds (Rustin, M. E., 1999, p. 51). They interfere with both the establishment of a containing relationship and a holding environment.

Rustin emphasizes how the care given to these children in early infancy (and beyond) is likely to have lacked helpful adult figures to assist the processes of discrimination. The care given to them has not been sufficiently attuned to the infant's need to modify early infantile anxieties (containment).

In addition the markers of familiar places, so important to young children, may have been confused or lacking. The view out of the window, the adults and children in view, the smells and the sounds may have all changed unpredictably (the holding environment?). The children may have experienced episodes of disorganised care in which individual carers did not feature strongly enough to acquire a shape in the child's mind or have had repeated experiences of care that have left the child feeling helpless in the face of unspeakable cruelty.

(Rustin, M. E., 1999, p. 153)

In these circumstances, the opportunity to achieve basic splitting in early development is often significantly interrupted and interfered with and the internal worlds of these children are often muddled and undifferentiated as a result. In addition, these children need to have space in their minds for, not only their birth families, but multiple carers and foster carers. Conflicts of loyalty are likely to exist and the 'opportunity to achieve basic splitting into good and bad' is undermined. 'This basic building block of the mind has to be in place before integration can occur...' 'When the children have such a patchwork of broken experiences to draw on they are unlikely to have a sense of what a mother, father, brother, sister is' (Rustin, M. E., 1999, p. 54).

According to Williams (1983) the experiences of these children have often left them with extremely inadequate mental resources with which to cope with a degree of pain that would overwhelm the most favourably parented children. She sees the problem as two-fold. First, the mental equipment is

faulty and second, even good equipment would probably be inadequate to manage the level of pain that confronts deprived children.

Arguing that, 'we need to bear this in mind when we try to grasp the children's experience of themselves and the effect they have on their new families', Rustin describes the 'complexities of family life lived in the shadow of often multiple painful prior experiences of families' (Rustin, M. E., 1999, p. 152). She concludes that the care that children with these atypical experiences may require is often of a different order than their chronological age would indicate.

## **2.20      Being the Recipient of Excessive Projections**

Selma Fraiberg, Edna Adelson and Vivian Shapiro (1975) in their seminal paper, 'Ghosts in the Nursery', track the roots of early experiences of trauma. They demonstrated how past, painful and terrifying events that have lain dormant in the parent's mind for years, can be re-activated in the present by the arrival of a new baby. These past events can suddenly become available for re-experiencing, for projection and re-enactment. The sudden emergence and re-enactment of these previously dormant experiences can mean that the new baby may be experienced either as a representation of the parent's own childhood parent or of the parent's own childhood self (Fraiberg, Adelson and Shapiro, 1975, p. 54). These re-enacted experiences can incorporate both sides of the parent's own early parent-child relationships.

According to Williams (1997a), children who have been exposed to the experiences of parents who have themselves suffered trauma and were either frightened or frightening, or both, can project anxiety instead of containing it. In her clinical work, Williams has extensively explored introjective processes in early development. She has described both what she terms, the 'play of lights', the introjective processes that facilitate development and the 'play of shadows', introjective processes that obstruct

and hinder development. Williams builds on Bion's (1962b) ideas about what happens when the object is impervious and not open to receiving projections; projections that have not been accepted are returned to the infant and the infant experiences 'nameless dread'. Williams hypothesised about 'the introjection of an object that is not only impervious but is overflowing with projections for which she coined the phrase 'Omega function'. The introjection of alpha function is helpful in organising a structure, the introjection of 'omega function' has the opposite effect, disrupting and fragmenting the development of personality' (Williams, 1997a, p. 126).

Susan Reid (1997a), in her paper, 'The other side of projective identification' makes a 'distinction between normal experiences of being projected into by adults who should be containing projections and the experience of the infant who has been massively projected into' (Reid, 1997a, p. 548). Where there is excessive projective identification from the mother into the infant, there is also a consequent deprivation for the infant of sufficient opportunities for projective identification and consequently of introjective identification. This interferes with the development of an internal space. The mother who unconsciously uses her infant as a receptacle for her own massive projections cannot be open to her infant's projective identifications. Being deprived of opportunities for projective and introjective identification can lead to an adhesive personality structure, false self, poor self-image and, at the extreme end of the spectrum, autism. The concept of massive projective identification draws attention to the impact of intrusive, hostile parental projections on young, vulnerable infants and children (Reid, 1997a).

## **2.21 Vulnerability to Past Experiences: the Influence of the Past in the Present**

According to M. E. Rustin (1999), it is a life-long reality for both fostered and adopted children and their foster carers and adoptive parents that their

lives are affected in unpredictable ways by the previous experiences of the children. These previous experiences are hard to comprehend when there is patchy knowledge of the child's early history. Difficult times can erupt and there is an absence of ordinary family memories that might help make sense of these (Rustin, M. E., 1999, p. 61).

Angela Hobday (2001) described difficulties that can emerge when parenting fostered children. She looked at the influence of previous experiences of children in care on their foster carers from a very different perspective. She coined the term 'timeholes' to describe sudden, unpredictable changes of behaviour in fostered children who had suffered earlier experiences of trauma and disruption.

Hobday described how a child's inappropriate responses could often be linked to past experiences and that these experiences were not always necessarily cognitively accessible to the child. Timeholes differed from the flashbacks associated with Post Traumatic Stress Disorder in that there was no awareness of a pre-experienced trauma; no event that might be accessible through memory. It appeared that the child had a 'flashback of affect and not cognition, which had dropped him back to a past event that had gathered emotional meaning over time' (Hobday, 2001, p. 44).

Hobday draws our attention to a particular difficulty in parenting fostered (and late adopted) children, encouraging us to consider the layers of children's experiences and the different kinds of memory systems involved. In this context, timeholes are a way of trying to help carers make sense of disturbing experiences. Timeholes can provide struggling carers with a way of viewing these experiences from the outside, creating a third perspective and making a language of action around their experience possible. Clinically, Hobday found the metaphor of timeholes useful; however, she found it harder to define timeholes in psychological terms.

Fraiberg, Adelson and Shapiro's (1975) paper focuses on parental ghosts from the parents' childhood whereas Hobday's paper focuses on the



unprocessed experiences of fostered children since coming into care. Their experiences in their families of origin will undoubtedly have influenced their experiences in care. When the two papers are read in conjunction, one gets some insight into the nature of disturbing processes and the dynamics involved.

According to Wittenberg:

The psychoanalytic study of the mind has shown that all our experiences, right from the very beginning of infancy, leave memory traces and the emotions connected with the events remain in the depth of our minds throughout life. These memory traces or what Melanie Klein (1957) called “memories in feeling”, that is to say in bodily or mental states and phantasies. These are re-evoked in us whenever the present situation in one way or another resembles an earlier one.

(Wittenberg, 2013, p. 3)

According to Wittenberg (2013), these imprints can emerge at times of change and transition. There are similarities in what Fraiberg, Adelson and Shapiro (1975) describe when they talk about the appearance of ghosts in the nursery in pregnancy. Hobday's (2001) timeholes are perhaps another version of these in which episodes and experiences from the past can disrupt and influence the present at times of change.

## **2.22 Relational Trauma**

Maggie Fagan (2011) introduced another perspective on the impact of the past on the present. In her paper ‘Relational trauma and its impact on late adopted children’, she eloquently described areas of relational difficulty from a child psychotherapy perspective. She explored the long-term consequences of early trauma which ‘include problems with affect regulation, difficulties in generalizing from one experience to another and

shifts between fantasies of omnipotent control and sudden helplessness' (Fagan, 2011, p. 129).

Fagan argued that children with experiences of early trauma and disruption 'live in two worlds, both internally and externally, and internal objects and memories from the past vie for ascendancy within the child's mind'. She asked 'which is more real, the world of the past or the present?' Fagan (2011, p. 129) described how the children she studied 'experience sudden and troubling shifts in focus as they were catapulted from feeling states belonging to one world into the other'.

Fagan's paper is of great importance to this research project as not only does she link the children's experiences to findings from neuroscience,<sup>15</sup> but also pulls together psychoanalytic thinking and child development research findings describing how the process of integrating these areas can support a child in psychotherapy and in their external environment. Fagan highlights the importance of parent work and engaging with the child's school. She also describes how gains in therapy 'can be compromised by experiences in school or at home which demand a complexity of relating', with which the children she worked with struggled (Fagan, 2011, p. 144).

Fagan's work looks at child psychotherapy in the context of three domains: developmental support, transference interpretations and links to the child's experience outside of the session. In Fagan's view, 'every therapy needs to include all three of these domains to a varying extent' (Fagan, 2011, p. 130). She argues that it is not about one domain or the other, but about how as child psychotherapists we pull together all three domains in our minds, creating a triangular thinking space in which new links can be made.

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<sup>15</sup> There are clearly relevant papers from neuroscience that could add to this research project, but this is outside the scope of the study given the word limit.

The children's psychotherapy group works extensively with the three domains of developmental support, transference interpretations and links to the children's experiences, both inside and outside of the group session.

## **2.23 Gaps in Development**

Canham (1999) identified repeated distortions in the development of the perception of time in fostered and adopted children. He highlighted striking difficulties. For example, a six year old girl in foster care who did not know what day it was. In focussing on these children's difficulties, Canham was not simply referring to the lack of 'an ability to grasp chronological time as measured in minutes, hours, days and weeks'. The children's difficulties with time 'were also apparent in a confused sense of past, present and future, where past experiences remain undifferentiated from the present and where the idea of the future is something just like the past' (Canham, 1999, p. 161).

In considering this, Canham draws our attention to how, in ordinary development, babies acquire a rudimentary sense of time: in the womb with the beating of the mother's heart and the rhythm of his mother's life, and after birth with the routine of feeding and care and with the father's background presence. Canham (2002) cites Piaget's view (Piaget and Inhelder, 1969), that it is the ordering of events for a child that allows him to build up a concept of time. Lev Vygotsky's (1962; 1978) ideas on scaffolding and the use of play in child development are relevant here.

Canham describes, in some detail, how the early experiences of children in care are likely to preclude this development, focussing on their experiences of being neglected for very long periods, including being left unfed, unwashed and forgotten and of early lives characterised by chaos and erratic, unpredictable parenting. In addition to an absence of a sense of order and routine, these children can also have their sense of security severely damaged by early experiences of emotional, physical and/or

sexual abuse (Canham, 1999, p. 161). This links with Kenrick's view that it is the interactions between an infant and his/her carers that are crucial for the establishment of a secure base.

The consequences of these kinds of early traumatic experiences are severe. In addition to missing out on an experience of regularity, so central to ordinary development, there is little opportunity for a child to have a sense of an adult who has time for them, who is attentive, available for the sorting out of feelings and impulses linked with particular stages of development. Early infantile needs and desires are not met and the child moves through the different stages of development with earlier stages of development still exerting an unmitigated effect. The children's developmental experiences would seem to match their undeveloped sense of time (Canham, 1999, p. 161).

Canham's paper demonstrates how relational the development of a concept of time is and how it is only through the process of the child having experiences digested and understood by a caring adult in the context of a containing relationship that a child can develop a real concept of time.

## **2.24 Addressing the Balance: Looking at the Other Side of the Dyad**

In studying the Grounded Theory literature, a research study was encountered that was not only helpful in getting to grips with the research methodology; it was unexpectedly useful in thinking about the research project itself. It is included here as it raises key questions in the context of important dyadic relationships.

From a sociological perspective, Celia Orona (1997) discussed 'Temporality, identity loss due to Alzheimer's disease'. She addressed one specific element of the caregiver's experience, temporality, in the context of providing care for a person with Alzheimer's disease experiencing identity

loss. Orona described how identity was socially constructed. '[...] identity is vague, complex, involving and often volatile. Thus a person is never fully "known". Even so, members of a dyad, for example, come to know aspects of another through countless interactions' (Orona, 1997, p. 182).

With clarity, sensitivity and perception, Orona emphasized how we negotiate the boundaries of identity in dyadic relationships that are rooted in social interactions. These social interactions have a time frame, both in the here and now and in the history of the relationship. According to Orona, each member of the dyad reciprocally participates in the maintenance and transformation of the other's identity in countless social interactions. Furthermore, each member over time develops an understanding of the boundaries of identity attributes.

Orona explored how the onset of Alzheimer's disease interfered with this process, exploring interpersonal relationships in the context of identity loss due to Alzheimer's disease. Highlighting the relational components of identity, Orona explored identity loss in the context of a dyadic relationship at the end of the life cycle. Orona's work raised many issues and questions that appear pertinent to this research project.

Orona was examining aspects of close-up, intimate relationships with important significant others in the context of dramatic change. Loss and the role of carer was a major focus of her study. Orona was looking at interruptions to enduring and loving relationships that had been established over significant periods of time.

This research project is interested in the development of a capacity to form and maintain relationships at the beginning of the life cycle; in how vulnerable children, in the context of a history of early trauma, disruption and loss of relationships can be supported in developing and sustaining new relationships. In the context of early trauma, young vulnerable children struggling to develop a sense of identity and a sense of time is an integral component of this.

Orona's emphasis on identity and the dyadic nature of relationships, particularly in relation to loss, raised questions about young, vulnerable children in care. Looking at the nature of important dyadic relationships, both the identity of the child and the identity of the foster carer(s) themselves are intricately related.

More importantly however, Orona's study raised questions about the plight of the children's foster carers (in their caregiving role); the foster carers' need to hold onto their own sense of self, their sense of identity and relationship. The SENCo and nursery nurse's experience with the Christmas tree is relevant here.<sup>16</sup>

## **2.25 Concluding the Review of the Literature**

Whilst constructing the literature review, with the conceptual framework of this research project in mind, the researcher became aware of the limited amount of available literature regarding the emotional experience of fostering. Although the situation appears to be changing in relation to adoption, literature is sparse on the process of transition from interim/short-term foster placements to adoptive/long-term foster placements.

Whilst this is the case in relation to the developmental impact on children undergoing long processes of transition and sustained periods of anxiety and uncertainty, it is particularly the case in relation to the children's foster carers and their role in supporting and facilitating these transitions. The importance of foster carers in supporting transition and maintaining links with children, once transition has occurred, is often not referenced in the literature (Rushton, 2000; 2004).

The literature review also identified significant gaps in relation to children's psychotherapy groups (Reid, 1999; Woods, 1993).

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<sup>16</sup> Orona's study took place in the early stages of the recognition of Alzheimer's.

It pinpointed a significant body of psychoanalytic literature that describes the difficulties children with early experiences of neglect, trauma and disruption have in forming relationships. This literature describes the internal world difficulties of these children in compelling depth and identifies a wide range of psychoanalytical concepts that are instrumental in understanding the internal processes of these children.

If this recognition is to progress beyond the predominantly descriptive, there is much space for innovative thought and exploration on how the children and their foster carers are best served by networks trying to address complex and prolonged issues of arrested development. There is a good understanding of the children's difficulties but how we might develop this understanding and these available concepts in a way that optimises the support available for the children and their foster carers, is largely missing from the literature.

The researcher's tangible experience of something missing has been the underlying motivation to take up the task in such a way that, it is hoped, contributes and engenders focus on narrowing these gaps with innovative research, multidisciplinary thinking and grounded literature.

Implementing and exploring a dual, non-linear perspective to address perceived gaps in the literature influenced the choice of research question which sought to contribute new knowledge to this field of study. The researcher had a number of ideas in mind which the literature review supported and extended: the influence of the past on the present and the experience of massively being projected into, to mention but two.

The thread of meaning that makes the undertaking of this research specific is the process of addressing what is described in the literature and linking this to the external world experiences of the children, the developmental tasks they face and how such significant impingements on development might be addressed. Before these difficulties can be addressed, they must be captured as entirely as possible, which is how this line of investigation

(the children's psychotherapy group and the semi-structured interviews) evolved.

This new approach contributes both a different perspective and poses a considerable challenge. It posits a more comprehensive picture by concentrating on the multiple relationships of these children, locating and holding on to the links in a non-linear way, all the time focussing on the child (McLoughlin, 2010).

The aim is to improve the understanding and quality of care and support, in order to minimise the impact of neglect, trauma and disruption on the children's development. This research project aimed to extend its focus beyond looking at the repetition of relationship difficulties rooted in the past and the impact of this on the child's capacity to manage transitions. The research project, in a sense, creates difficulty by not narrowing its focus in this way. It sought to approach the research task with an open mind using an Applied Grounded Theory Methodology to locate, identify and validate the need to maintain a wider focus during the process, if progress in uncharted territory is to be considered.

The children's psychotherapy group, the structure of the group and the group setting were seen to provide the best way of exploring, not only the interplay of the children's relationship difficulties and their impact on important adults but also the ways in which the children were likely to struggle in managing these developmental tasks. Themes that emerged within the group were likely to be enormously important in this regard, particularly in identifying the obvious, subtle and hidden nature of the children's difficulties. The in-depth exploration of the children's difficulties in the group is re-visited in the interviews with the children's foster carers. This is seen as a way of building on and developing the understanding that emerges.



### **3. Research Task**

#### **3.1 The Primary Research Question**

“What can be learned from comparing a child psychotherapist’s experience of the children in a children’s psychotherapy group with the narrative accounts of foster carers describing the same children in their care?”

#### **3.2 The Secondary Research Question**

“Are these comparisons useful in planning future support and treatment for the children and their foster carers?”

#### **3.3 Aims of the Research Project**

1. Using a psychoanalytic frame within a Grounded Theory Analysis, this research project aims to retrospectively examine a child psychotherapist’s experience of a children’s psychotherapy group for five young ‘looked after children’ in transition. Group phenomena and its links to the children’s experience will be explored.
2. This research project aims to use the understanding gained from the analysis of the children’s psychotherapy group to explore semi-structured interviews with the children’s foster carers.
3. Comparing the data from the group with the data from the interviews, the research project will examine the links between the child psychotherapist’s experience of the group and the experience of the foster carers parenting the children. Drawing on the psychoanalytic literature and the experience of the group and of the foster carers this research project will consider the nature of the children’s relationship difficulties and the gaps in their

development. It will focus on the developmental tasks the children face and how they might be best supported with these.

4. The research project will consider whether the exploration and analysis of this data might usefully inform work with children and their foster carers and what might be gained from the experience of the group.

## **4. Methodology**

### **4.1 Ethical Considerations**

#### **4.1.1 Ethical Approval**

Research ethics covered every stage of the research process. Ethical approval needed to be obtained at the beginning. This research project is a multiple case study that received ethical approval from the University of East London, North West Research Ethics Committee (District 7) and the Local Trust's Research and Innovations Department. Much of the research project's first year was spent working with the Local Research and Innovations Department to obtain this ethical approval. Although this process was rather time consuming and involved considerable thought, training and application, it was informative and useful in guiding the course of the research.

It is in the nature of ethics committees 'that they do not list proscribed behaviours' but 'frequently they offer advice on what aspects of research require ethical attention and the circumstances in which exceptions to the generally accepted standards may be considered' (Howitt and Cramer, 2007, p. 78). Ethical Committees (and indeed professional bodies) impose a duty on the researcher-clinician to engage in consideration and consultation about the ethical standing of their research.

The Ethics Committee of the University of East London focussed on the question of consent. Although information sheets and consent forms for the children's foster carers and social workers had been submitted, the University also required consent forms for the children.

The children would be infant school children aged between 4 and 7 and as such would not be able to give informed consent, but they would be able to give assent. Consent forms and information sheets were devised for the children (Appendix C). This was a helpful process, particularly given the

focus of the research project. Greater formal emphasis on including the children in this process, letting the children know what was going to be happening to them, led to more written information being given to the children's foster carers and social workers (Appendix C).

The University of East London also wanted clarification regarding record keeping and the storage of research data. It enquired about the project's submission to the Local Ethics Committee. There are two Local Ethics Committees, the North West Research Ethics Committee (District 7) and the Local Trust's Innovations Department's Safeguarding and Ethics Committee. Submission to both committees was required.

The North West Research Ethics Committee and the Research and Innovations Department's Safeguarding and Ethics Committee were less concerned about consent forms for the children. The Research and Innovations Department did require changes in the format of all submitted consent forms to clarify and bring the forms in line with other consent forms used by the Trust.

The North West Ethics Committee needed assistance in understanding the nature of transference within the study<sup>17</sup> and help elucidating the research task.

#### **4.1.2 Ethical Principles**

Research in this area is subject to rigorous research governance protocols and the Data Protection Acts, 1998 and 2003 (Brown and Ward, 2012). A guiding principle of research is that 'no harm' should come to any individual as a result of their agreement to facilitate or take part in the research. The rights of vulnerable subjects are well protected and 'no harm' has a number of dimensions. Ethics Committees have a framework for thinking about risk

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<sup>17</sup> I am grateful to Adrian Sutton for the contribution he made in this regard.

and the potential for harm; safeguarding confidentiality and upholding the participants' right to withdraw at any time being fundamental examples of this framework.

The Local Ethics Committee raised a number of concerns. They asked the researcher to identify potential areas of risk and then asked how these identified risks would be addressed. These are included in Appendix D.

The children, foster carers and social workers participating in the research project were aware of their right to withdraw at any time. They were also aware of their right to anonymity. In accordance, all names have been changed and identifying details altered or removed. Ethical principles have been adhered to throughout this research project.

## **4.2 Research Design**

### **4.2.1 Study Design**

This research project is based on a children's psychotherapy group for five 'looked after children' in transition aged between 4 and 7. The group ran for 10 weeks and was facilitated by two co-leaders, the researcher and a CAMHS Mental Health Practitioner. The researcher collected the data from the group and also undertook semi-structured interviews with the children's foster carers. The interviews were tape recorded and transcribed. Process notes from the group sessions and the interview transcripts were analysed using an Applied Grounded Theory Methodology. Themes that emerged from the group and foster carers' interviews were compared and the results explored and examined.

Children's psychotherapy groups are a means of providing an arena in which detailed, comprehensive multi-layered assessments of young children in transition can take place. The children's sense of self and belonging, the nature and range of their relationships and their individual

strengths and difficulties are often visible in a children's psychotherapy group. Groups can be experienced as less threatening and less stigmatising than other settings (Reid, 1999).

According to Susan Reid (1999) in a children's psychotherapy group, children can feel less lonely and less isolated and see that others have problems too. In children's psychotherapy groups each group member is a potential catalyst for change. Indeed, group members are often able to say things and have these heard in a way that the group co-leaders cannot (Reid, 2007). This makes children's psychotherapy groups particularly useful for 'looked after children' in terms of their sense of self-worth.

In addition, the structure of the group (the group frame) with its timing and fixed number of sessions also enables children's difficulties with separation, beginnings and endings to be identified and worked upon in more detail.

In order to cope with the newness and strangeness of the group setting, each child is likely to look for characteristics of important others and create familiar settings. Consciously or unconsciously children can project into the co-leaders and/or other children in the group, aspects of their past relationships and previous experience. This transference experience becomes available for study. Looking at the location of emotional disturbance within the group allows themes to develop that resonate; unconscious links are made and underlying themes can be recognised. The counter-transference experiences engendered in the co-leaders of the group provides additional important information.

What can be recognized and what is hidden and overlooked in the context of a children's psychotherapy group is likely to be important. By analysing the data in relation to the counter-transference experiences of the child psychotherapist observing, participating and analysing the group and then exploring the foster carers' interviews, it is hoped that hidden aspects of the children's communication will be revealed.

Children's psychotherapy groups can offer the opportunity of producing detailed descriptive accounts of children's intimate relationships from the perspective of their internal worlds. This takes account of conscious and unconscious elements, providing what Michael Rustin (1999, p. 52) describes as a 'primary evidential base'. Group work can provide a basis for qualitative research; the group becomes the frame for analysing group interactions.

#### **4.2.2 The Children's Psychotherapy Group as a Laboratory of Study**

Rustin (1999) argued that psychoanalytic inquiry has followed a pattern of laboratory based science as outlined by Bruno Latour and Steve Woolgar (1986). Rustin emphasized how the conventions of the clinical consulting room were developed to facilitate the study of primarily unconscious mental phenomena. A children's psychotherapy group provides what Rustin would describe as the best research laboratory (Reid, 1999; Rustin, M. J., 1997; 2009); for studying transference phenomena in relation to the children's relationships.

#### **4.2.3 The Treatment Model**

A children's psychotherapy group was set up that followed a psychoanalytic model pioneered in the group workshop at the Tavistock Centre. It relied extensively on the work of Susan Reid (1987; 1991; 1999). It interestingly also drew on Sorenson's (2005a) work on 'transition facilitating behaviours' and Sigmund Heinrich Foulkes' (2003) ideas of 'dynamic administration'.

The group took place at the CAMHS clinic in which the two co-leaders worked. Ten group sessions took place, six before Christmas and four sessions following a four week gap for Christmas. Each session lasted for one hour and fifteen minutes and followed a structure of coming together in

a circle both at the beginning and end of the session with free play activity in between. The group took place in the family therapy room. This venue was chosen in preference to other possible venues as it was felt that the setting could more easily be preserved and protected. The sessions took place in the afternoon giving the children time to have their morning session in school as well as their lunch and allowing their foster carers' time, if necessary, to collect other children from school.

The aim was to provide the children with a containing space that allowed what Daniel Stern (1985) has described as the optimum level of disequilibrium, a space in which development can occur.

#### **4.2.4 Selection of the Children**

As Susan Reid wrote:

The composition of a group is critical to its success or failure. Experience suggests that 'mix' is the essential element. The most successful groups seem to be where there is an observable spread of ages amongst the members. Children of one age grouped together can often become very stuck; they can also become very competitive. The very knowledge that they are the same age seems to surmount any other knowledge in importance and does not allow the same flexibility of behaviours which can be observed when children are chronologically different ages.

(Reid, 1999, p. 252)

The group comprised five vulnerable 'looked after children' with histories of early trauma and disruption. They were all in foster care, unable to live in their families of origin and at the time of the group were in transition, awaiting decisions about permanency and future placement (adoption or long-term foster placement).



A number of children were assessed before the group commenced and selected for inclusion on the basis of the pervasiveness of their difficulties and the nature of their problems. The coping strategies of individual children were considered - aggression, projection, withdrawal, flight into activity and emotional collapse.

In addition, the differing nature and areas of their anxiety were examined. Their ways of relating and capacity to play were explored. Two girls and three boys all aged between 4 and 7, were eventually chosen for the group. These five children were seen to be significantly different enough to form a group and have what Susan Reid (1999) has described as 'a balance of difficulties'.

According to Susan Reid, five is the optimum size for children in the latency period (aged 4 to 11). Five 'seems to be the maximum number that children, up to the age of eleven years of age, can relate to in a therapeutic way, and very importantly, the most that can be contained by the therapists' (Reid, 1999, p. 253). The experience of previous children's psychotherapy groups experimenting with numbers of five and six children confirmed this.

A small number of children were assessed but not included. This was due to a number of factors: the clinical balance of the group as outlined above and a range of environmental factors - imminent moves, the distance to the clinic and the availability of their foster carers.<sup>18</sup>

#### **4.2.5 Preparing the Children for the Group**

For a number of reasons, before commencement, school observations were undertaken on all of the children assessed for the group. There was

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<sup>18</sup> The selection of the children for the group is a surprisingly emotional process which perhaps resonates with selecting adoptive and long term foster placement for the children. There is a pressure to get this right and often a feeling that one child should have been included (Mark, for example) and another not (Jason?).

awareness, for instance, of the difficulties young children in care can have in school.

As well as presenting a wide variety of distressing and challenging behaviours, 'looked after children' can present difficulties that are not easily identifiable. The observations in school provided important general information about the children.

Anna Freud Story Stem Assessment Profiles (SSAPs) were undertaken with the children and repeated again after the group. SSAPs are both a research and assessment tool used clinically with children with experiences of maltreatment, trauma and disruption. The SSAPs could provide additional information regarding the children's internal world representations. SSAPs can produce powerful images of children's experiences, (Appendix E, Appendix F).

Essentially, both the school observations and the SSAPs were undertaken as part of the children's introduction to the group. The child psychotherapist carried out the SSAPs; the co-leader observed the children in school. This enabled both co-leaders to get to know the children prior to their participation in the group.

The school observations and the SSAPs also provided a means of amassing detailed information regarding the children. Although this information would not be part of the data analysed, it could provide useful additional information to add to the researcher's perspective of the children's presentation and the nature of their difficulties. In addition the SSAPs are a means of triangulating data.

#### **4.2.6 The Purpose of the Group**

Clinically the group aimed to promote the children's emotional, social and cognitive development. The children's inclusion allowed them to access additional resources that the group provided. It also aimed to highlight the

children's strengths and difficulties and help foster carers, and the professionals involved in their care, to recognise these more clearly.

The intention in the following section is to provide detailed information that will assist the reader in analysing the clinical material from the group.

#### **4.2.7 Play Materials**

A selection of play materials was provided, which followed those suggested by Susan Reid (1999). There were five coloured plastic envelopes with the children's names on. These contained a supply of paper, felt tips, scissors, Pritt stick and a pencil. In addition there were also items for sharing: sellotape, erasers, pencil sharpeners and string. The children's envelopes were given to the children at the start of each session and kept in the group box between sessions (Reid, 1999).

Additional toys and soft materials were also provided. These included two igloo tents, two tunnels (one covered and one partially covered) a doll or baby's bed or cradle, additional cushions and blankets. The aim was to provide diverse soft materials for the children to use and lots of 'inside places' that were not immediately identifiable as 'houses/homes'. The focus was especially on soft materials as it was felt that the children would be bringing the 'hard materials' (their painful experiences) with them. In this light the doctor's kit was found to be particularly useful in promoting phantasy play.

#### **4.2.8 Group Box**

There was a large, plastic chest like box which was opened in the group room at the end of the 'coming together in a circle' time, as the children moved to 'free play' and, ten minutes before the end of the group session, closed again as the children returned to the circle. Referred to as the 'group

box', it was emphasized that the box was for the group and contained additional toys for thinking about 'soft feelings' and 'babies'.

Although not emphasized to group members, a baby doll linked to gender and ethnicity, was provided for each of the children. There were a number of baby doll items: a baby mat, a tower of plastic cups, a bag of nappies, a number of baby blankets, a towel, a baby's play mat, various bottles and baby feeding items and a bag of baby clothes. Other soft dolls (again from differing ethnic backgrounds) were provided; a tall black rag doll and a black doll wearing a basketball outfit. A number of telephones were provided, an adult phone, two play phones and two mobile phones.

#### **4.2.9 The Group Calendar**

To enable the children to follow the course of the group, a calendar was made with the children's names at the top and pictures linking to both gender and personal features of the children (for example, hair colour and skin tone). Boxes were created on the calendar with the dates of each session the children would be attending in addition to boxes for planned holidays.

#### **4.2.10 Boundaries and Rules**

The group had a range of boundaries, the room, and clinic setting: the time frame and boundaries about safe behaviour and physical contact. Some of these boundaries were introduced at the beginning of each session; others were referred to as needed over the course of a session. For example, if a child was attempting to hurt another child or break a toy there would be a discussion with that child and other children in the group about keeping things safe and not hurting themselves and others.

#### **4.2.11 Preparing for the Group**

The two co-leaders gave considerable thought to the initial selection of the group, which children would be included and how each child would be prepared and introduced to the group.

There were meetings with the children's social workers and separate meetings with the children's foster carers to discuss the research project and the group. Following these meetings all the social workers and all of the children's foster carers agreed to be part of the research project (the fifth foster carer later changed her mind, she wished to contribute by bringing and supporting the child in her care to the group, but did not wish to be part of the research project). Consent forms were completed by the children's social workers and, where appropriate, their foster carers (Appendix C).

Before the group's commencement and following the observations and SSAPs, each child visited the clinic with their foster carers. The group room was fully set up for each of these visits introducing the children to the clinic, the group room, its contents and each of the co-leaders.

#### **4.2.12 Setting up the Research Children's Psychotherapy Group**

The earlier groups had highlighted the difficulties the children experienced when separating from their foster carers and making the transition to the group room. These groups followed Susan Reid's (1999) model of collecting the children and lining them up.

Considerable thought was given to how each child would be best supported when joining the group session; how they would separate from their foster carers and negotiate the journey to the group room. Previous groups had highlighted both the significance and difficulty of this transition.

A wide range of factors influenced decisions regarding the structure for this research group. During observations of the children in school there was a painful awareness of the more marked difficulties children, with histories of early trauma and disruption, can have with transitions.

These transitions are ordinarily difficult and teachers in primary schools are often very in touch with these. Observations revealed that it was common for the children to excessively seek to be at the head of any line of children in school, to be by the door, to be first. In these instances there was often a pervasive idea that if they were not first they would be forgotten or drop out of the mind of the organising adult and be lost forever.

In looking at individual children we were aware that at least one had severe difficulties with separation. We were also in touch with the structure of the building in which we worked, in particular the large foyer. The foyer could seem like an enormous, empty chasm for children with difficulty separating from parents and carers.

In addition, we knew of the struggles in getting children along the corridor to and from the group room. Aware that this was both an important component of the containing function of group work and the establishing of a working-together adult couple, we were also aware this was a particularly vulnerable group of young children and it was vitally important not to underestimate the depth and reality of their difficulties and vulnerabilities.

To help the children manage the anxiety evoked by separation, each child was collected individually, taking them with their foster carers along the corridor to the group room, repeating this sequence after each session when returning each child to the waiting room alongside their foster carer.

This was seen as a way of managing the difficult task of transition to the group room. It linked the children with their foster carers in a way that is commonplace in schools when helping young children settle into Nursery or

Reception; this attempt to bridge the 'transitional gap' was influenced by the work of both Susan Reid (1999) and Sorenson (2005a).

From a research perspective this change in structure would open the transition itself to more exploration and provide additional information regarding the children's experience of the transition and the coping strategies they used.

Despite this departure, Susan Reid's ideas about giving each child an opportunity to be first and last; alternating which of the co-leaders would collect the children and which would receive the children in the group room were still maintained. This alternating gave the children an experience of a working-together couple, both co-leader and foster carer (Fagan, 2011) and the two co-leaders running the group (Reid, 1999).

The co-leaders spent time preparing for the group and, as this was to be their first co-operative experience, had discussed the nature of group work and their particular anxieties regarding this. The presentation of particular children was considered.

One child was thought to have marked difficulties with separation (session material Liam below). These difficulties were such that there were concerns about whether he would manage the group. As a result of this concern, pictures of the group box closed, opened and closed again were used to illustrate the group at the beginning, the group working together and the group coming together at the end.

This extra consideration led to the decision to collect this particularly anxious child last for the first group session, reasoning that if distress occurred at separation he would be better supported by two adults with him in the group room.

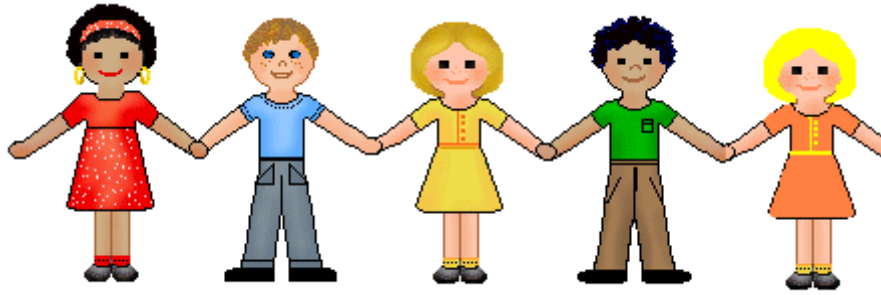
These are examples of what Foulkes (1964) would term 'dynamic administration'.

Dynamic administration is a fundamental group analytic tenet that in adult group psychotherapy is primarily associated with Foulkes. He stressed that group administration is dynamic, when the way that it is conducted and the concern and understanding involved come together to provide a good model of relating for group members to absorb. Dynamic administration refers to the practical details of conducting and managing the group setting (time, space, and territory) and the impact of this organization on the group itself.

The importance of dynamic administration lies not merely in the realms of the practical but in what the practical represents and symbolizes. This is crucially important to the functioning of groups, involving much planning and thinking on simple transitions; recognising their significance.

Children's psychotherapy group dynamic administration or group management, although not specifically referenced as such, is inextricably linked to the 'finely woven' work of Susan Reid (Personal Communication, 2004). This weaving refers to the attention that is paid to simple details of boundary and setting. In the group arena children re-enact their difficulties in different ways. These re-enactments are visible to the co-leaders and the other children and are recorded in the process notes (see the section on data collection below).





### **4.3 Data Collection**

#### **4.3.1 The Children's Psychotherapy Group**

In order to analyse data from the children's psychotherapy group, detailed process notes were written immediately following each of the group sessions. The notes were written in a way described by Margaret Rustin (1997) and Susan Reid (1987).

Process notes were considered to be a more suitable method than audio recording (the interviews were audio recorded). Whilst audio recording might be an aide-memoire, process recordings are part of the psychoanalytic method of experiencing the group and by using this method; nuances of the transference and counter-transference experience could be noted in more depth.

In many ways the process notes followed normal practice, for the writing up of individual psychotherapy sessions for supervision, in that process notes are made once the session has ended. These notes usually involve a very detailed written account of all that has taken place, from collecting the child from the waiting room to returning him/her afterwards; the child psychotherapist is responsible for taking in all that is seen and heard in the context of the session. There is a clear link between writing process notes in this way and the concepts of transference and counter-transference. This process demands a high degree of emotional receptivity. The task is to

allow this taking in to have a life in the mind and then record this in as much detail as possible (Reid, 1997b).

Group psychotherapy notes generally follow this method with additional thinking taking place on how to write up and record the particular dynamics of the group. Experience suggested that concentration was needed when including detailed experiences of the group at times of transition and change, during the move to and from the waiting room and the move into and from the group circle. What was happening within the group, at different times with different children, would need to be observed and recorded.

In each session it was important to consider the experience of the child psychotherapist. This would need to be included in detail and consideration was given on how best to record this.

The co-leaders wrote notes on their observations and experiences of the group immediately following each session. Subsequently, both co-leaders met to gather their separate accounts of their observations and experiences. This was viewed as an integral part of processing both the children's psychotherapy group and the experience of co-leading the group. It was an important part of the processing of each session and preparation for the following session. These meetings took place prior to and following individual group sessions and were an addition to the supervision sessions provided by the consultant child psychotherapist.

For this research project, the child psychotherapist's process notes were used and combined with extracts from the co-leader's notes which were added in an attempt to order the time and sequence of events within individual group sessions.<sup>19</sup> The child psychotherapist's process notes, with the additions provided by the co-leader, were taken to supervision and formed the data for this research project. These combined process notes were presented by both co-leaders in the regular supervision sessions.

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<sup>19</sup> I am grateful to the co-leader who gave permission for her process notes to be included in this research project. Her contributions have been appropriately referenced.

### **4.3.2 Supervision of the Group**

Fortnightly supervision sessions of the children's psychotherapy group were provided by a consultant child psychotherapist. Both co-leaders met with the consultant and discussed the sessions using process notes. The supervision sessions lasted for an hour during which ideas and experiences were generated. These experiences came alive and could be actively thought about. Presenting the material generated further recollections. How these recollections emerged could be carefully considered. The memories, thoughts and additional material these recollections gave rise to could be added to the process notes.

The notion of a dynamic group relating in multi-faceted, multi-layered ways was fundamental to this research project and organising the process notes of the group was undertaken with this very much in mind. The plan was firstly to analyse the process notes from the group; the coded transcripts of the semi-structured interviews with the children's foster carers would then be analysed separately with the experience of the group being held in mind. An Applied Grounded Theory Research Methodology was used to analyse both sets of data and comparisons made.

### **4.3.3 The Foster Carers' Semi-Structured Interviews**

To gain a comprehensive understanding of the foster carers' experience of the children, this research project also made use of a series of semi-structured interviews.

The interviews were undertaken with the children's foster carers immediately before the first session of the group commenced. They were repeated mid-group and again immediately after the group ended. The interviews were audio recorded and transcribed. Consent for the recordings had been obtained and the recordings and transcripts were stored in accordance with local trust policy.

Initially all five foster carers agreed to participate in the interviews. All of the foster carers were informed that they could withdraw their consent for the interviews at any time and that this would not affect the treatment of the child in their care. One of the foster carers withdrew her verbal consent. Three of the children's foster carers completed all three of the semi-structured interviews. The fourth child's foster carers completed two of a possible three semi-structured interviews. In all, eleven interviews out of a possible fifteen interviews were completed, transcribed, coded and analysed.

In placing significant emphasis on the foster carers' experience, the research project not only acknowledged their importance but recognised the complexity of the task they faced in parenting children with sustained experiences of early trauma and disruption. In this way the relational aspect of the focus of the study, looking dynamically at the children's experiences from different perspectives and in different contexts was underlined.

#### **4.3.4 The Form of the Semi-Structured Interviews**

The following section describes the design of the semi-structured interviews used in this research project; their nature, composition and use as a research tool.

A semi-structured interview is a research tool commonly employed in qualitative research within an interpretivist paradigm (see below). They are used to collect qualitative data by setting up an interview frame that allows the interviewee the time and scope to talk about their perceptions of a particular subject. The focus of the interview is guided by the interviewer who directs and determines the flow of questions.

Semi-structured interviews are not without their disadvantages. According to positivists (who adopt a scientific position), semi-structured interviews can be seen as unreliable because the results of these interviews cannot

be replicated. An additional criticism often raised by positivists is that it is possible for interviewers to introduce their bias to the interview by consciously or unconsciously interfering with the interview process. According to positivists, interviewees too - for a wide variety of reasons - can feel under pressure to give socially acceptable answers or present positively due to their perception of the interviewer or the interviewer's expectations; possibly leading to invalid data.

Despite these disadvantages, semi-structured interviews can produce information of high validity in that interviewees are able to talk in depth about a topic. Both detail and questions about the meaning of a particular action or response can be picked up by the interviewer. A potential strength of the semi-structured interview is the positive rapport that can develop between the interviewer and interviewee. A semi-structured interview is a very simple, efficient and practical way of accumulating data about things which cannot easily be observed (feelings and emotions, which Weber termed 'Verstehen' (Haralambos and Holborn, 2011), shared experience and understanding).

The semi-structured interviews in this project loosely followed a structure of questions (Appendix H) similar in sequence to the structure of questions asked in the Adult Attachment Interview (George, Kaplan and Main, 1984). The Adult Attachment Interview (AAI) protocol is a semi-structured interview that includes a series of increasingly targeted questions and prompts designed to elicit memories and representations of early attachment relationships (George, Kaplan and Main, 1984).

The AAI asks for five adjectives to describe key relationships and then analyses what each adjective evokes in the interviewee.<sup>20</sup> The beginning of the foster carers' semi-structured interviews followed a similar format in that

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<sup>20</sup> Question 3 in the Adult Attachment Interview – "Now I'd like to ask you to choose five adjectives or words that reflect your relationship with your mother starting from as far back as you can remember in early childhood — as early as you can go, but say, age 5 to 12 is fine. I know this may take a bit of time, so go ahead and think for a minute... then I'd like to ask you why you chose them. I'll write each one down as you give them to me."

foster carers were asked for five adjectives to describe the relationships they had to the children in their care. Their responses were considered by tracking their narrative accounts and the context in which these were set and presented.

Subsequent questions were organised around the foster carers' relationship with, and sense of the child in their care. The focus was on the foster carers' perceptions of the children, the children's difficulties and their ways of relating. Specific questions relating to the impact of caring for the children were asked. The influence of the group on the children was also explored.

Throughout the interviews a rapport was built up with the foster carers and questions were asked when it was felt appropriate to ask them. Sometimes these were pre-prepared questions, or relevant questions that emerged during the interview. The wording of the questions was not necessarily the same for all foster carers. Although this could add difficulty when comparing responses, the spontaneity could also add to the quality of the information obtained.

The interviews began with specific questions and explored aspects of the foster carers' replies. The foster carers were given space to respond to the questions, to find five adjectives and then given space to explore each of the adjectives. These questions had been devised over the course of previous children's psychotherapy groups and trialled with other foster carers.

The interviews were often a source of support for foster carers, seen as similar to individual parent/carer sessions in that they provided a space for foster carers to think about the child in their care. There were notable variations. In response to the foster carers' choice, the interviews took place in a wider variety of settings (the foster carers' home or other clinic settings) and were guided by the format of the semi-structured interview which provided a loose framework or structure of questions.

The object of the interview was to understand the foster carers' views of the child in their care; using open ended questions like: "Tell me about Denham...", "A few moments ago you said that Eleanor... could you tell me more?", "What comes to mind in relation to Nelly...?"

Particular attention was paid to the setting of each interview, the interviewee's affect and the interviewer's perception of how the interview went, how questions were answered and the emotions elicited during the interviews. For example, Mrs. N.'s own emotional experience of being a younger sister to older twin brothers only became known to the interviewer when Nelly's foster carer was thinking about Nelly's experience with her twin brother Mark.

The interviewer's counter-transference during the interview was also recorded. In this instance counter-transference is a way in which an interviewer may become aware of the feeling states of the interviewee of which the interviewee may not previously have been conscious of. This information was noted on two different occasions, immediately after the interviews and again retrospectively when the interviews, together with their transcripts, were replayed. Consideration was given to the sequence of questions. Any sudden divergence of questions and the thoughts and emotions the interviews evoked were noted. All these sources of information were recorded in note form and contributed to the coding and analysis of the data.

It was acknowledged that the process of interviewing the foster carers was likely to affect what was found (the interviewer effect). Tape recording the interviews was likely to have a similar impact (the tape recorder effect). Whilst the researcher acknowledged this, it was thought that these effects would be minimal in relation to the richness of the data collected.

The researcher analysed in detail the process notes of the group and the responses the foster carers gave in their semi-structured interviews, using

an Applied Grounded Theory Methodology the two sets of data were then compared.

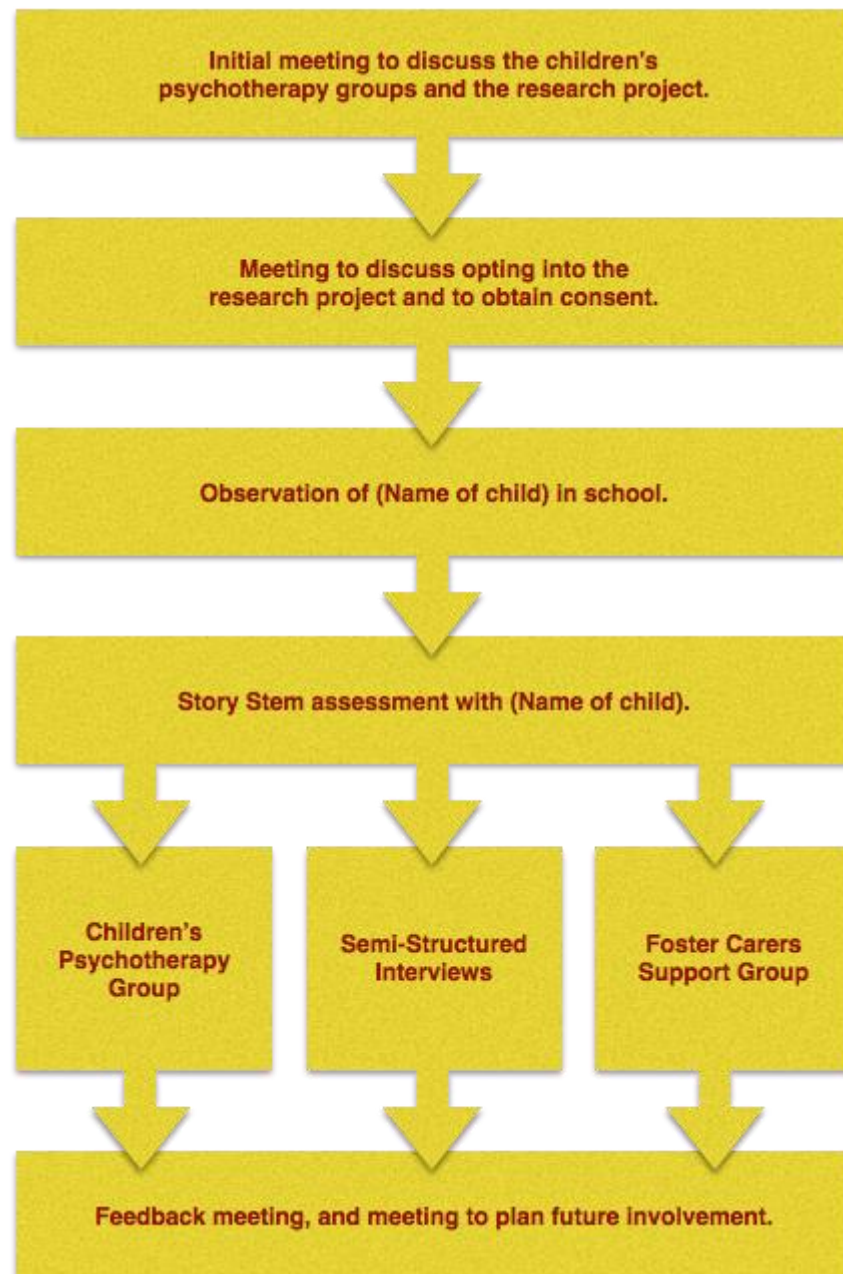
#### **4.4 Research Methods**

##### **4.4.1 Starting the Research Project**

The aim of this research project was to explore a child psychotherapist's experience of a children's psychotherapy group whilst examining the foster carers' narrative accounts of the same children over the same time frame. The research project was a primary clinical research project with a focus on clinical work. The researcher-clinician was the author and her clinical experience guided and influenced the research project.



**Fig 2. The Structure of the Research Project**



#### **4.4.2 The Research Paradigm**

This research project is located within an interpretivist research paradigm which emphasizes qualitative rather than quantitative research methods.

Rather than focussing on the investigation of causes, interpretivists tend to focus on how things are experienced subjectively by those directly involved in social arenas; aiming to understand the social world through examining the interpretation of the world by its members. They argue that it is only by in-depth study that we can begin to understand the people and situations that are being studied (Becker, 1993). Weber (1949) highlighted the important concepts of labelling and Verstehen. Verstehen means empathetic understanding: understanding a situation from the viewpoint of another group or individual.

Quantitative approaches are distinctly different and usually reflect the positivist view that research should remain based upon scientific methods of gathering empirical evidence by direct, systematic observation. This can then be used to develop statements about the nature of human behaviour which are similar to laws in science, which can be tested, for example through hypotheses. Statistical data is gathered and often subject to statistical mathematical analysis to explore the relationship between different variables or factors.

The positivist approach would suggest that research should be as objective as possible and that researchers should adopt and maintain a neutral position in conducting research by not allowing personal views and values to bias their results. By following specific quantitative methods and personal detachment, there is less likelihood that conscious or unconscious biases will influence their work. This approach attaches importance to the replication of research by other investigators.

Interpretivists argue however, that structuring research in this way narrows and significantly limits the kind of studies that can be undertaken;

suggesting that qualitative research methods offer systematic approaches for discovering significant aspects of human experience that remain inaccessible to traditional verification methods. Interpretivist analyses attempt to describe, explain and understand the lived experiences of groups of people. Researchers need to build up a rapport with those who are being studied and create a solid working relationship where information can be accessed and expressed in a trusting way. If this is the case, data produced will be valid.

The concept of validity refers to the extent to which the data collected gives a true description of what is happening. Valid data will have the detail and depth that gives the researcher a well-rounded picture of their area of study. Data can be valid but not reliable, so general statements about the area of study may not be possible but it is conceivable that the data increases our understanding of small groups (White, Hayes and Livesey, 2013).

According to Kathy Charmaz (2006), Grounded Theory bridges positivist and interpretivist approaches; it unites the research process with the development of theory, blurring the rigid boundaries between data collection and data analysis. Grounded Theory offers researchers rigorous procedures to check and make conceptual sense of large amounts of data.

#### **4.5 Research Methodology**

Initially, a number of different qualitative research methodologies within an interpretivist paradigm were considered (Interpretive Phenomenological Analysis, Thematic Analysis, Discourse Analysis and Grounded Theory). As the choice of research methodology shapes how one frames the research question, analyses the data and draws conclusions, it was important to make the right choice.

These four qualitative research methodologies were explored in order to see which methodology would be the most relevant, useful and productive for this particular research project. In explaining why Grounded Theory was chosen, an outline of the alternative research methodologies is provided below.

Interpretive Phenomenological Analysis (IPA) is a relatively recently developed qualitative approach within the social sciences. It aims to understand lived experience and how participants make sense of their experiences. Jonathan Smith and Mike Osborn (2003) suggest that IPA is the best way of analysing semi-structured interviews.

However, in terms of this research project, whilst IPA might be the best method of analysing the semi-structured interviews with the foster carers, it was considered less suitable for analysing the data from the group. It was decided that further methodologies would be explored that might be better suited to the analysis of process notes.

Discourse Analysis, the second methodology considered, is a general term for a number of approaches for interpreting and analysing written, vocal and sign language (Johnston, 2008; Fairclough, 2005; Fairclough, Mulderrig and Wodak, 2011; Wetherell, Taylor and Yates, 2001; Jorgensen and Phillips, 2002). This approach analyses naturally occurring language to reveal socio-psychological characteristics of the person using the language.

This research project had a wider focus on intimate relationships rather than merely the communication of language and again, although discourse analysis might generally be useful in analysing the foster carers' interview data, it was considered less helpful in terms of analysing the process notes from the group.

The third methodology considered was Thematic Analysis, which is the most common form of analysis in qualitative research and the methodology

most likely to be used by newcomers to qualitative analysis. It emphasizes pinpointing, examining and recording patterns within data. Themes are patterns across data sets that are important to the description of a phenomenon and are associated to a specific research question.

As a research method itself however, Thematic Analysis appeared to have received less detailed attention in the literature. Accounts of how to carry out Thematic Analysis were scarce, with many researchers glossing over what is actually involved (Howitt and Cramer, 2007).

Looking more closely at all four methodologies it appeared that all had elements of Thematic Analysis. Perhaps more importantly, key elements of Thematic Analysis were thought to be integral to Grounded Theory.

After lengthy deliberation an applied, abbreviated, descriptive form of Grounded Theory (Fox, 2009)<sup>21</sup> method was selected. As Grounded Theory methods are best learned in practice, it was only during the course of this research project that the appropriateness of Grounded Theory was fully realised and understood.

#### **4.5.1 Grounded Theory**

Grounded Theory is a research method that was developed primarily for use by sociologists.<sup>22</sup> Introduced initially by Barney Glaser and Anselm Strauss (1967), it has been extensively developed since its original conception (Glaser, 1978; Strauss and Corbin, 1990; Charmaz; 1990; 2000; 2006; 2012). It is currently the most frequently cited research method in the social sciences and other allied areas such as psychology, psychoanalysis and nursing.

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<sup>21</sup> A note of appreciation to John Fox for his contribution in thinking about the choice of research method for this research project.

<sup>22</sup> Grounded Theory is a methodology that can be used for quantitative or qualitative data or both, but it is mainly used for qualitative data. It has been argued that the use of Grounded Theory with a psychoanalytic approach is an adaptation of Grounded Theory Methodology.

A systematic, inductive and comparative method of inquiry, Grounded Theory, in its pure form, does not begin with preconceived notions about a research topic; nor does it begin with an initial hypothesis or require an in-depth literature review to guide the direction of the study. It relies instead on theory building (Walker, Read and Priest, 2013).

A central idea of Grounded Theory is that the theory 'built' is discovered in context and that this makes it more relevant (Charmaz, 2006).

Theories flash illuminating insights and make sense of murky, musing and knotty problems. The ideas fit. Phenomena and the relationship between them you only sensed beforehand become visible. A theory can alter your viewpoint and change your consciousness. Through it you can see the world from a different vantage point and create new meanings of it. Theories have an internal logic and more or less coalesce into coherent forms.

(Charmaz, 2006, p. 128).

Charmaz prefers the process of theorizing rather than relying on pre-formed theoretical concepts and argues that Grounded Theory is unabatedly interpretative. Theorizing is a practice. It involves the practical activity of engaging with the world with the task of constructing abstract understandings about it. This brings meaning into view. In this sense Grounded Theory has parallels with psychoanalytic group psychotherapy in that the task in group psychotherapy is to engage with the practical process, to hold the psychoanalytic frame and to search for meaning.

In Grounded Theory, process is central. It is dynamic, moving and changing. This clinical research project borrows from a social constructionist perspective of Grounded Theory, as this perspective lends itself well to the psychoanalytic process and to the analysis of material from both the group and the interviews with the foster carers.

Social constructionist principles emphasize practices and actions rather than explaining realities; exploring what people assume is real and how they construct and act on these views of reality (Charmaz, 2006, p. 127).

For grounded theorists the emphasis is on discovery rather than on validation (Glaser and Strauss, 1967; Rustin, M. J., 2009); understanding rather than explanation; theoretical understanding itself is seen as abstract and interpretive. The very understanding gained from the theory developed, rests on the theorist's interpretations of the studied phenomena. Interpretive theories allow for indeterminacy rather than seeking causality and give priority to strong patterns and connections rather than linear reasoning.

Group psychotherapy is a highly charged arena and holding and maintaining the group structure, whilst analysing what is occurring, is a challenging aspect of group work. Similarly this research project involved the processing and analysing of significant amounts of complex data. At first glance the research project, like the group, felt too huge a task. Yet by keeping the task manageable, by defining and holding on to its structure, this challenge was met.

Grounded Theory provides a set of strategies for conducting rigorous qualitative research (Charmaz, 2006). It is seen as a good method of gathering information and generating new knowledge about topics that had previously received scant attention; in this case, the emotional experience of fostering and children's psychotherapy groups (Hollway and Wheeler, 2010). Grounded Theory was thought to be well suited to both this relatively unexplored area of study and the varied data sources and could, it was envisaged, be used to explore both the process notes of the group and the audio-recordings of interviews.

Anderson (2006, p. 329) argued that 'a well-suited partnership can be formed between psychoanalytic clinical research and Grounded Theory'. This partnership has the capacity to provide explanatory mechanisms and

findings that are translatable to routine clinical practice. Grounded Theory offers a rigorous and deeper analysis that allows greater separation and differentiation within the psychoanalytic frame.

Grounded theory is not without its drawbacks. One of the criticisms of Grounded Theory is the generalizability of the data due to the use of small and unrepresentative samples. Additional criticism lies in the use of Grounded Theory making it difficult to detect or prevent interviewer bias or observer effect (the Hawthorne Effect) in turn leading to invalid data (Landsberger, 1958).

#### **4.5.2 The Role of the Researcher in Grounded Theory Research**

According to Glaser (1978), professionals need to use their background and training in order to see and understand the nature of the data that they are analysing. In psychoanalytic group psychotherapy the personal involvement of the researcher is made explicit by the use of psychoanalytic techniques in which attending to the transference and counter-transference is an integral tool in understanding intra-psychic processes. Looking at the group and the interviews within the psychoanalytic frame was inevitable, necessary and acceptable in the context of this research project. As a result, this research project followed an Applied Grounded Theory Methodology rather than Grounded Theory Methodology in its pure form, as psychoanalytic theoretical concepts are applied to the data.

David Rennie (1998, p. 30) suggests that researchers using Grounded Theory are faced with a paradox as they '[...] attempt to rid themselves of preconceptions about the phenomena under investigation so that its "true nature" will be allowed to emerge in the analysis. At the same time they believe [...] that this is not possible'. Rennie proposes that Grounded Theory Methodology can resolve the growing crisis in confidence concerning research methods in psychology.



Referring to the researcher's professional background, Glaser (1978) acknowledges the influence of education and training in sensitizing the researcher to the task of analysing data. The researcher's ability to use theoretical coding draws on his professional thinking. This suggests that the conceptual framework of the researcher cannot be separated from the thematic interpretation of the data.

The Grounded Theory process involves the recognition of the researcher's perspective in the analysis of the data (Strauss and Corbin, 1990; Fox, 2009). This is not seen as bias but as a vital component to data analysis and theory generation. This is in keeping with Charmaz's view where 'any theoretical rendering offers an interpretive portrayal of the studied world, not an exact picture of it' (Charmaz, 2006, p. 10). This research project uses a psychoanalytic frame within an Applied Grounded Theory Analysis in order to facilitate the understanding of complex social processes from a psychoanalytic perspective; the psychoanalytic clinician bringing her psychoanalytic thinking to inform the data analysis and the development of theoretical codes.

Burnsall (2004) points to an essential pragmatism in the Grounded Theory approach:

[...] every researcher, equipped with the basic premises of grounded theory methodology, goes on to develop their own variation of grounded theory technique, adapted to the context and purposes of the study and the individual's mind set.

(Burnsall, 2004, p. 81)

#### **4.5.3      Triangulation in Grounded Theory**

Peter Fonagy and George Moran (1993, p. 66) argue that if case study research is to go beyond mere illustration, qualitative research methods should use data from other sources to support conclusions as a way of

improving credibility. For example, it would be possible, in this clinical research project, to use other independent data sources as a means of triangulation, adding to the concepts and theories developed.

Historically, triangulation is a mapping term but it is used in this context to illustrate how different points of view may be used to support data in clinical research (Denzim, 2007). Additional sources of information (such as additional meetings with the children's foster carers, the foster carers' supervising social workers and the children's social workers in relation to individual children, as well as the observations of the children in school and the SSAPs) provided useful additional sources of background information. Although this background information was not part of the data to be analysed, it offered data which provided an alternative perspective that helped broaden the thinking about the group and the foster carers' interviews.

To help the reader some additional information referring to the school observations, SSAPs and meetings between the co-therapists has been included in the appendix (Appendices F and G).

This background information provides a way of triangulating and referencing the observations and data in the research project. Triangulation could be conceptualized so that practicing it is consistent with what Altheide and Johnson (1994, p. 642) term 'subtle realism'. It is hoped that this could come some way to offsetting Grunbaum's (1948) criticism of the contamination of findings in psychoanalytic research.<sup>23</sup>

In addition this study used supervision as a method of triangulation, both the clinical supervision of the work and the supervision of writing the thesis. Supervision provided a third space in which the data from the group and this thesis could be explored further from the different perspectives of the

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<sup>23</sup> The original intention was to focus more on the material from the SSAPs and school observations... but this was not possible given the complexity of the research project and the limited word count. In Appendix F some reference is made to the school observations and SSAPs as a source of triangulation.

researcher, co-leaders and the different supervisors. This was a way of mitigating against bias.

#### **4.5.4 Coding**

In Grounded Theory raw qualitative data is studied and coded. 'Coding is the process of assigning a label to segments of data that simultaneously categorize, summarize and account for each piece of data. Unlike quantitative coding, where preconceived codes are applied, qualitative Grounded Theory Coding means creating the codes as you study the data' (Charmaz, 2006, p. 43).

The researcher's previously conceived theoretical concepts may ultimately influence the conceptualisation of the data, but they do not offer automatic codes for analysing the data. This appears to be in keeping with Freud's view, 'I hold that one should not make theories, they should arrive unexpectedly like uninvited guests, while one is busy investigating details' (Freud, 1915, pp. 73-74). It is also in keeping with Bion's (1962b) thoughts on allowing meaning to emerge before grasping at psychoanalytic theory.

From the codes, categories develop. In the analysis of session material, themes and areas of interest emerge. Discovering variables and inter-relationships becomes central to the analytic process. Charmaz holds a view that coding fragments data and builds it back up again. The researcher needs to bring data back to a coherent whole.

Coding defines what is happening within data; the dense texture of relationships around a category then becomes visible. According to Anderson (2006) data can, in different ways, be 'fractured' to add understanding to categories, their properties and inter-relationship.

The emphasis on coding in Grounded Theory builds empirical checks into the analytic process and leads researchers to examine alternative

theoretical explanations for their empirical findings. It allows researchers persistent interaction with their data whilst remaining constantly involved with emerging analysis. Data collection and analysis progress simultaneously and inform and streamline each other.

Grounded Theory is about theory generation not proof. Raw qualitative data is studied and coded and categories emerge from this process. Categories have properties that provide descriptions of phenomena studied, these are added to by constantly visiting the data until the category becomes saturated (Charmaz, 2006). 'Theoretical sampling ceases when saturation is achieved' (Moore, 2007, p. 23). A point is reached when further analysis of the data adds no more detail. This is decided by the intuition of the researcher.

According to Ian Dey (2007), keeping an open mind is essential; it is important that categories are rooted in the data. The data is analysed seeking the underlying logic of apparently disparate events, recognising causal inferences at work through categorizations across settings and using representational techniques to evaluate evidence and explore connections between categories.

Moving back and forth between collected data and emerging analysis makes the collected data progressively focussed and the analysis increasingly thorough and theoretical. According to Charmaz (2006) it involves taking a fresh eye to the data and producing line by line initial codes.

Combing through the material, to extract as much detail as possible, means that findings are continually checked against the data by a process called 'constant comparative method'. Threads of meaning emerge and are then developed into ideas and theories (Charmaz 2006).

Theories generated, using the Grounded Theory Method must be of use, relevant to the chosen topic and viable in the context of the data. They

must be predictive and offer explanation and understanding. This process does not prove that these theories are correct but that the theories are a set of integrated threads of meaning and a step on the way to the development of further understanding.

How concepts emerge out of the data is a pertinent question which has been the focus of much controversy and conflict. How progress is made from both initial coding to the core category stage is key.

Wendy Hollway and Tony Jefferson (2000) have discussed the importance of holding the whole in mind when analysing data. Drawing on the work of Wertheimer, the founder of Gestalt psychology, Hollway and Jefferson emphasize the Gestalt idea in which a whole is greater than the sum of the parts. For Hollway and Jefferson, creativity and intuition are important features of subjectivity.

Qualitative research is the result of hard work and a systematic approach, gathering enough data with which to synthesize and make analytic sense.

#### **4.6 Analysing the Data**

This research project analyses data from both the children's psychotherapy group and the semi-structured interviews with the children's foster carers using an Applied Grounded Theory Methodology.

Coding the material provided a means of creating distance, a separation from the totally absorbing experience of the group, making a different kind of analysis possible. At times coding was an exciting process.

The categories developed from the initial codes enabled the researcher to understand what the data indicated; making it possible to access comparisons between different children and foster carers over time.

The experience of time was an important component, particularly in relation to young children in transition and the foster carers who care for them. Charmaz (2006) has emphasized how we do not have a direct language to talk and think about time and highlighted how the notion of time is often unspoken and taken for granted. In semi-structured interviews, interviewees' stories are often located in concepts of time and implicitly refer to qualities of experienced time. Charmaz made attempts to access this temporal component in the wording of her interview questions.

#### **4.6.1 The Concept of Objectivity**

The idea of neutrality, of not wanting to contaminate or influence the emergent results pervaded this research project. It is inevitable that the researcher influences what emerges from the data so it is important to be aware of this during the process. Despite this awareness the illusion of objectivity still remained; the researcher did not want to contaminate her understanding of children in the group by analysing the interviews prior to analysis of the group. This limited the changes she could make to the structure of the interviews and meant that the interviews, like the group, had a constant frame.

An Applied Grounded Theory analysis of the qualitative clinical data was undertaken. Information from the detailed process notes of the group was sequentially analysed line by line. Two columns were created, one on the left, for the presentation of the process notes and the other on the right, for line by line initial codes which summarized the material, selecting its salient features (Rustin, M. J., 2009). These initial codes were literally cut up into strips, looked at individually and then pulled together into focussed codes and then into core categories (Appendix J). A similar process was followed for analysing the interview data.

Large volumes of data were obtained from the process recordings of the ten group sessions and the eleven interviews with the children's foster

carers. A major task was to distil this large volume of data and concentrate on the emerging focussed codes. Using an Applied Grounded Theory Methodology, the aim was to combine psychoanalytic technique with Grounded Theory; to engage with the work clinically, through a psychoanalytic conceptual lens and then code and analyse the data from both sources.

The experience of this cutting up style provided the child psychotherapist with a greater degree of separation between the psychoanalytic experience of the group and the Grounded Theory analysis. As the codes were pulled together core categories could be identified and then thought about again using a psychoanalytic perspective. An Applied Grounded Theory analysis appeared more suited to the analysis of the process recordings of the group than the analysis of the interviews. Due to the researcher's experience of the group, codes were both easier to identify and greater in number.

#### **4.6.2 Coding the Process Notes from the Children's Psychotherapy Group**

The data from the process notes, made immediately after each session by the child psychotherapist with the additions from the co-leader, were analysed using an Applied Grounded Theory Methodology. Beginning with the first session (and with each of the other ten sessions in sequence) the material from the group was coded line by line. A total of 809 initial codes emerged.

These codes were repeatedly analysed and more focussed codes became apparent (Appendix K). The focussed codes were analysed again and core categories related to important aspects of the children began to emerge. It became possible to highlight and identify these. Applied Grounded Theory Methodology allows for the generation of different theoretical ideas. This

facilitated thinking about the material in a new way which ultimately led to the formulation of the research perspective.

This coding process was not easy and the researcher struggled and repeatedly returned to an image that was particularly prominent during the course of the group. A compelling thought had been that the central task in the group was to keep thinking. Thinking was important in order to pull together and hold threads of experience. This thought was so prominent in the researcher's mind during the course of the group that she tried to give the idea of pulling together threads of experience a physical shape, an image or picture. The diagram below is a result of this:

**Fig 3. Thinking about the Group Process: Threads of Experience**



This diagram captures the experience of the group. The group produced lots of clinical material that needed a mind that could contain something of the children's experiences. Sometimes it was overwhelming and the



importance of continued thinking and searching for meaning was crucial. The researcher kept returning to this image (diagram above) and the idea of pulling together threads of experience. The process of coding the data could, at times, feel very similar. This experience in the group helped to sustain the researcher in coding the research data.

#### **4.6.3 The Codes**

The initial codes of the group were analysed and organised into 41 focussed codes and then into 5 core categories. Two major core categories, 'Avoidance' and 'Being in Touch', were identified. 'Avoidance' accounted for 112, or 13.5% of the 809 initial codes: 'Being in Touch' accounted for 107, or 13.2%. Later, these two core categories were usefully combined into a joint category of 'Avoidance/Being in Touch'. In total, these core categories combined accounted for over a quarter of the 809 codes.

The next prominent core category was a 'Corridor/Transition' category, accounting for 67 or 8.3% of the 809 initial codes leading to a core category encapsulated as one of 'Negotiating Transition'.

Closer exploration revealed a combined core category of 'Missing and Loss' (accounting for 44, or 5.4%) where a number of initial codes related to missing (16, 2.2%) and loss (28, or 3.5%), could be usefully combined. A 'Sense of Self' linked to a sense of identity (35, or 4.3%) and 'Presentation and Joining' (32, or 4%) formed the other two core categories.

Eventually five core categories were identified:

- 1. Negotiating Transition**
- 2. Presentation and Joining**
- 3. Sense of Self**

#### **4. Missing and Loss**

#### **5. Avoidance/Being in Touch**

##### **4.6.4 Exploring the Codes: An Initial Difficulty**

The process of coding the data from the group was in many respects overwhelming. Whilst the experience of the group helped to sustain the researcher to remain focussed, it was nonetheless a daunting task. The researcher realised that whilst she had some cognitive understanding of Grounded Theory, it was only when applying Grounded Theory that she came to understand the reality of developing theory from data (Charmaz, 2006).

In cutting up coded material and bringing fragmented codes back together, each line felt 'recognisable'. Placing codes into categories felt relatively straightforward but returning to the material to develop and re-work the codes was surprisingly difficult. The fragmentation remained. Some of this difficulty was part of the ordinary research process but aspects of this difficulty were particular to this client group; the fragmentation of the self, inherent in the experience of early trauma, deprivation and loss (Boston and Szur, 1990; Hindle and Sherwin-White, 2010; Kenrick and Tollemache, 2006). It could be argued that group work puts us more in touch with this fragmentation (Reid, 1999).

##### **4.6.5 Exploring the Codes: Keeping to Task**

Despite this the original material was re-grouped into five core categories and details were gathered and organised into descriptive accounts of each of these. Avoidance often involved an interruption, a cutting off or a physical moving away that was visible and apparent; a defensive shutting out, for instance, an absented empty chair at the beginning or ending of a group session. The original material was returned to again with the more defined core category and pertinent examples were found (see below).

This process was repeatedly reworked (theoretical sampling) until no further details could be gathered and the data was saturated (Strauss, 1987). Using these core categories, observations and counter-transference experiences were also explored.

Charmaz (2006) suggests that theoretical sampling is interpreted differently by different researchers. Theoretical sampling is defined as the process of identifying and pursuing clues that arise during analysis in a Grounded Theory research project. Theoretical sampling is different from sampling strategies used in other types of research. In other research designs, the researcher usually makes decisions in relation to who, what, where, when and how to sample during the planning phase. In Applied Grounded Theory research, the aim is to build theory through the construction of categories directly obtained from the data. Through 'theory-directed' sampling, one is able to examine concepts from various angles and question their meaning for the researcher's developing theory (Strauss, 1987, p. 276).

#### **4.6.6 Coding the Data from the Semi-Structured Interviews**

412 codes were obtained from analysing the data from the eleven semi-structured interviews, compared with 809 codes from the ten sessions of the children's psychotherapy group. These 412 codes were then analysed into 21 focussed codes for the interview data, compared with 41 focussed codes for the group. The 21 focussed codes obtained from analysing the interviews were worked and reworked until four core categories emerged.

These core categories were identified, worked and reworked in the same way as the codes for the group. The two sets of core categories were then brought together and two core categories were found to occur in both the interview and group material. These were Sense of Self and Identity, Separation Difficulties and Negotiating Change.

#### **4.6.7 Limitations of the Study**

This research project was limited by the need to protect confidentiality. Some of the information from both the group and the interview material was restricted because of the need to remove identifying information and maintain anonymity.

There were also limitations due to sample size. Investigating such small samples meant that generalizing would not be possible. The size also made it difficult to look at various outcome measures and attempts to measure the effectiveness of the group and interviews. These areas were not within the remit of the study but could be explored further at a later date with larger samples.

The sample size was reduced further by the fact that only four of the five foster carers agreed to take part in the interviews and that one foster carer completed two rather than three interviews. Eleven interviews took place out of a possible fifteen, which reduced the data available and significantly limited the study, particularly in relation to the understanding of Jason.

This was a small scale clinical research project and the absence of the four interviews was not anticipated. Jason's foster carer initially indicated an intention to be part of the study but then withdrew. Liam's foster carer had health issues at the start of the research project so she was unavailable for the first interview. The absence of these four interviews limits the study.

The research project was a huge task and it could be argued that the volume and complexity of the data obtained also limited the study. It was hard to think about how this might be avoided without overlooking important aspects of the intimate space in the children's close relationships with their important adults.

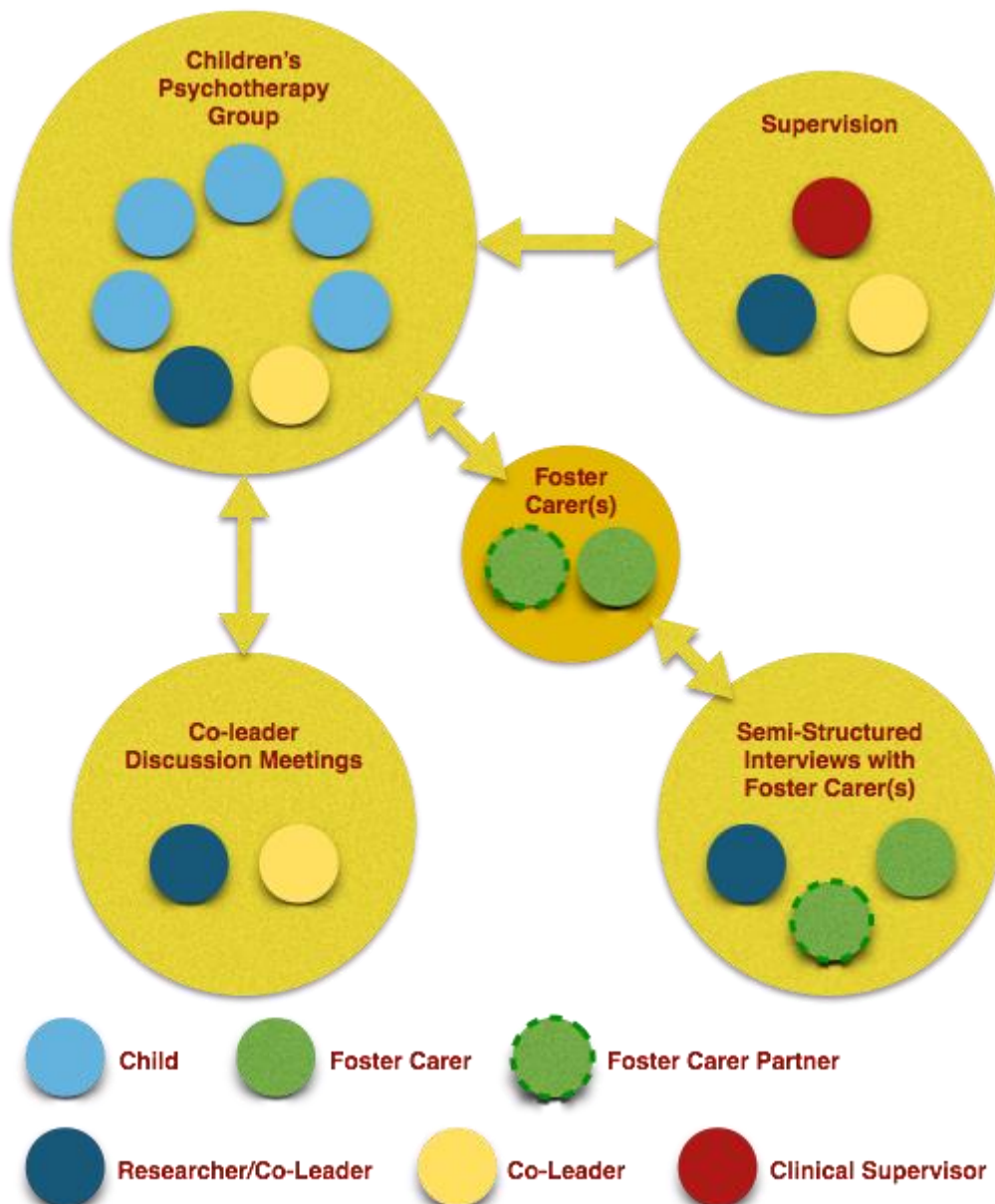
The research project aimed to explore the processes involved in these intimate relationships in the context of a group and in the narrative

accounts of the children's foster carers. This was its primary focus. The intention was to generate questions and find meaning in this complex area that had direct relevance to clinical work, to foster carers and the professional networks that maintain them.

Subsequent projects are likely to break the task into smaller areas of study; for example, focussing more on the foster carers' experience as a way of building on this research project.

#### 4.7 Presentation and Analysis of the Data

Fig 4. A Diagram Illustrating the Children's Psychotherapy Group



## **5. Part 1. The Children's Psychotherapy Group**



### **The Children in the Group**

#### **Denham**

Denham is a bright, talented seven year old boy of dual heritage (White British and Jamaican) with two older brothers, Darren aged 10 and Denzil aged 11. Denham's mother has had two more children since the boys came into care three years ago; these children have also been placed for adoption.

There is a history of domestic violence, drug use and gang related crime in Denham's family of origin and both of Denham's parents have served long prison sentences for violent offences. Denham's father is currently serving a long sentence and there are anxieties about his release. Denham spent the first eleven months of his life with his mother in prison before going to live with his maternal grandmother and his two older siblings. During this period, and after his mother's release, Denham, it seems was largely cared for by his eldest brother, Denzil. There was a notable absence of consistently available adults and the boys came into care when their mother returned to prison.

Denham shares a foster placement with his two older brothers. His foster carers Mr. and Mrs. D. also have two adult male children, the youngest of whom is still living in the family home.

## **Nelly**

Nelly is a pretty 6 year old girl of White British heritage with long dark blonde hair, usually tied in bunches. She is one of eight siblings. She has a twin brother, Mark. Mark presented as “skinless” and hyperactive but Nelly’s withdrawn and rather frantic presentation was seen as equally worrying.

Nelly’s early home situation was characterised by parental drug misuse, domestic violence, chaos and profound neglect. Her very experienced social worker had first-hand experience of the children’s home and was able to describe the chaos, dangerousness and the awfulness of this in considerable detail. This ‘seasoned’ social worker was profoundly shocked by Nelly’s home environment. In Nelly’s family of origin, boys were clearly prioritised over girls and Nelly played a huge parenting role in relation to her twin brother Mark and their younger brother Adam.

Nelly and Mark came into care at the age of four and were originally placed in their current foster placement with their younger brother, Adam, Adam was placed for adoption fifteen months before Nelly’s referral to the group. An adoptive placement was actively being sought for Nelly and Mark. A placement had been found and Nelly’s attendance at the group was part of the children’s preparation for adoption. Mr. and Mrs. N. are an elderly married couple with extensive fostering experience. They have previously fostered twins. They have older married children and grandchildren.

## **Nelly’s Inclusion**

As there were a number of boys with very similar difficulties included in the group, thoughts about the balance of the group led to Nelly’s inclusion.

The impact of including Nelly in the group rather than her twin brother Mark was not fully anticipated. At the time of group selection it was considered that Mark’s presence in the group would have led to an imbalance of the



children's difficulties and this could have led to a reduction in the therapeutic quality of the group both in terms of assessment and treatment.

Including both children was not considered an option at the time of group selection as other children in the group had siblings that also could have been included. Mark clearly struggled with what he might have experienced as a real rejection given that his twin sister attended the group and was likely to have reinforced his exclusion.

Support for Mark was provided and links were made with the therapeutic educational worker working separately with both children. He provided extra support for Mark. Mark was included in a Nurture Group in his primary school. Regular meetings took place with school to support both Mark and Nelly.

## **Liam**

Liam is a 5 year old boy of White British heritage. He presents as a smiley boy, keen to engage with adults. He seems to need to touch the faces of adults and tell them they are gorgeous. Liam has a rather square-shaped head, dark black hair and big, saucer-like eyes. He has an older sister and brother, Suzanna (aged 9) and Colin (aged 8).

In Liam's family of origin there was a history of domestic violence and physical violence directed towards the children. Liam's father was described as frightening and his mother as submissive. His older brother Colin was the particular recipient of father's violence. Liam and his eldest sister Suzanna witnessed many violent assaults and at times were at the receiving end of this violence.

Liam came into care at the age of 3, as a result of physical injury and extensive neglect. Suzanna and Colin were placed together in a different foster placement. Liam, together with his youngest sister Sarah, was placed in his current foster placement with his foster carers Mr. and Mrs. L.

Sarah was later placed for adoption. Liam and Sarah were the first children Mr. and Mrs. L. had fostered. Mr. and Mrs. L. have a daughter of their own aged 9 and currently foster very young children in preparation for adoption.

Liam has significant developmental delay; he has language difficulties and physical difficulties which are genetic in origin. Liam attends a special school.

## **Eleanor**

Eleanor is a pretty 6 year old girl of dual heritage (White British and Nigerian). She has long, black, curly hair which she wears braided. Eleanor is the youngest of four children (her father also has two older children from a previous relationship, both girls in their late teens).

Eleanor's parents' relationship had been characterised and dominated by repeated acts of aggression and violence. Eleanor's father had repeatedly hurt Eleanor's mother. Eleanor's parents had separated. Eleanor and her two older sisters and older brother came into care following a violent incident at the family home. Eleanor's mother had stabbed Eleanor's father when he returned to the family home in an apparently violent state. The children witnessed the incident and the events that occurred when the police and ambulance service arrived. Following the children's initial reception into care they spent time living with maternal grandmother but her health, and the behavioural difficulties the children presented meant that this placement was not sustainable.

Eleanor had initially been placed with her two sisters and older brother who is 11. Her brother's difficult behaviour led to his move to another foster placement. Eleanor lives with a lone foster carer, Mrs. E. who has two adult children in their late twenties who have both left the family home and have children of their own.

## **Jason**

Jason is an attractive 6 year old boy of dual heritage (Black British and Black African). He has black hair and dark eyes. He is one of seven siblings (the second oldest of the five children who share the same mother and father) and has two older half-sisters.

Jason's father is older than his mother. Jason's parents are both 'fighters' engaging in continual fights with the world and each other. These fights often ended with police involvement. Both of Jason's parents have convictions for Grievous Bodily Harm, which have resulted in episodes in prison.

Jason came into care when he was 4. He and his three brothers were initially placed together with a lone foster carer. The boys' aggressive behaviour was immediately a cause of concern. Jason is the second oldest. His youngest brother was placed for adoption over a year ago. His other younger brother had been placed in a local 'Treatment Foster Care Programme', which follows an American behavioural model in an effort to prepare traumatised children for long-term foster placement. Jason's older brother currently awaits a move to an adoptive placement. Jason has recently moved to a short-term foster placement and a further move to a long-term foster placement is planned. Jason sees his older brother but does not see his two younger brothers. Both Jason and his older brother are still attending the same school, a school they attended whilst living with their parents. No details can be provided of his foster carer.

### **5.1 Presentation of the Children's Psychotherapy Group Findings**

The group met for a total of ten planned sessions, six took place before Christmas; there was a four week gap for the Christmas holidays and four sessions took place after the Christmas holidays. Four children attended all

ten sessions and one child (Eleanor) attended nine sessions. Process notes were made in the way described above on all ten sessions; these were all coded and analysed. Five core categories emerged.

The five core categories are presented, not in terms of their prominence in the data (see earlier), but in a way that helps the reader by following the course of the group. Session material is incorporated to illustrate the core categories as they are presented. The structure in which the codes are presented sometimes means that session material is presented out of sequence. Attempts have been made to correct this without losing the coherence for the reader.

## **5.2 The Five Core Categories**

The five core categories which emerged from this coding and analysis are described below and the findings from the group are presented.

The five core categories are:

- 1. Negotiating Transition**
- 2. Presentation and Joining**
- 3. Sense of Self**
- 4. Missing and Loss**
- 5. Avoidance/Being in Touch**

### **1. Negotiating Transition**

This section introduces the children to the group and describes in detail the first session of the group. The material presented from the session gives an indication of how the children negotiated their transition into the group. It also highlights the first core category Negotiating Transition. This first category was chosen as the first to explore because Negotiating Transition

marked both the coming together of the group and the first encounter with the children's difficulties.

Negotiating Transition was a core category that encompassed managing change and the transition along the long corridor, the journey from the waiting room to the group room. Transition along the corridor, as well as incorporating a number of physical transitions, involved the children leaving and separating from their foster carers and facing a new situation. This is an ordinary, everyday activity for young children and they often need adult support. It was more difficult for the children in the group, as it perhaps stirred up earlier painful transitions and highlighted gaps in the children's development:

*I went into the waiting room and asked for Jason and felt a sudden panic as I couldn't find him; I couldn't locate him in the waiting room. My first thought was that we had four children not five and that Jason and his foster carer were late. I then located Jason's foster carer, I noticed Mrs J. at the back of the waiting room on the left. She seemed to mirror my panic and said that Jason was in the toilet; he had just gone to the toilet. We went out to the foyer together. After a short wait, I became conscious of the time and said to Jason's foster carer that I would return for him later.*

(Session 1)

The counter-transference experience of collecting Jason was one of panic and an anxiety or inability to find him or for him to be found. Reflecting on this and what was happening in the waiting room at the time and subsequently, helped to process and digest the experience. The counter-transference experience was intense and did not seem to equate with what is a very ordinary experience for a child psychotherapist: going to the waiting room to collect a child for a session and finding that he or she had gone to the toilet. This seemed to trigger powerful primitive anxieties. It seemed that both the child psychotherapist and the foster carer were trying to order similar emotional experiences which seemed hard to process and

think about. This appeared to be directly linked to Jason and his disappearance.

This experience encompassed the task of this research project, which was to look at the child psychotherapist's experience of the children in the group and compare this with the foster carers' experience parenting the same children. It could be argued that both the child psychotherapist's experience and Jason's foster carer's experience were connected to the projections and defences Jason used to manage his experience. The material would suggest that this was probably related to an earlier panic in his early life of being lost and unable to find the adult he needed.<sup>24</sup>

Returning to the waiting room to collect Denham:

*I found Mrs. D., Denham's foster carer; Denham was playing on the floor on my left. He seemed pale and lost. Mrs. D. and Denham came with me and we walked to the group room. Denham ran along the corridor going to each door in a "bursting in" way saying, "This is it, this is it." There are rather a lot of doors. I gently talked to Denham about which room it was. I talked to Denham about finding the room and it being the room he had been in previously with his brothers and his foster carers. I felt clumsy and it seemed hard to get their names out. I knocked at the group room door and said that Denham's foster carer had brought Denham and at the end of the group today Denham's foster carer would come to collect Denham.*

(Session 1)

In contrast to Jason being missing, Denham would appear to present as easily found and eager to join the group (as evidenced by him approaching each door in turn). Perhaps his eagerness was related to not being able to manage being in between the waiting room and the group room i.e. to not

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<sup>24</sup> Jason's material comes early in the life of the group. It could be argued that it could also have been included in the Missing and Loss core category. However, it is an experience in relation to his first transition to the group room. The material suggests that one of the ways Jason copes with transition is to go missing.

being connected with his anxieties about transition. In his own way, Denham, like Jason, was hard to find and seemed to set himself up for repeated disappointment, “*this is it... this is it*”. This material would suggest that Denham appeared to be creating a disappointment of which he was in control. This could be explored in further sessions.<sup>25</sup>

Denham was hard to reach as he raced ahead and approached each of the doors in turn. He was hard to find. It was hard to link with him and support him, evidenced by repeated verbal attempts to do this. ‘*I gently tried to talk to Denham about which room it was*’ and then tried to support him more actively. This would appear to indicate that despite Denham’s eager presentation, the counter-transference experience was one of his being lost. The experience of trying to help Denham by linking to children and adults, that he could link with in his mind to support him (Fagan, 2011), left the child psychotherapist feeling ‘*clumsy and it seemed hard to get their names out*’.

Every time that Denham shouted excitedly, ‘*this is it, this is it,*’ and it was not, Denham’s disappointment was palpable. Denham needed to approach each door in this way and be repeatedly disappointed in order to negotiate the transition. He was attempting to take control of the situation and avoid being in a position of not knowing.

### **The Nature of Transitions**

In order to participate in the group the children had to negotiate a number of transitions over the course of each group session: the transition along the corridor, of moving from the waiting room through to the foyer, along the corridor and into the group room.

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<sup>25</sup> Looking through the material from different sessions there was evidence of Denham repeating this kind of experience.

Once in the room there was the structure of looking at and discussing the calendar, the structure of the circle that marked the beginning of the group, the fact that the children had come together. When the structure of the circle ended, there was often a marked 'invisible' difficulty as play opened; it appeared that the children at this time could often have an experience akin to a 'sudden loss' or 'falling' (Boston and Szur, 1990).

At the beginning of the group session, the structure of the circle held the children. The children may or may not have liked the structure of the circle but, paradoxically, the circle contained them, evidenced by the increase in particular behaviours once the circle ended.

When the children were gathered in the circle, they could rebel against it by being out of their chair, by sitting on one of the co-leader's chairs, wanting to move out of the circle to open play before the structure of the group at the beginning was complete. Ignoring or not thinking about the calendar was a good example of this. Not thinking about the calendar enabled the children to avoid thinking about time and structure in relation to Negotiating Transition. Their opposition to what was expected and required of them gave them a structure, albeit a structure in opposition. This sudden loss of structure could lead to a marked increase in behaviours which demanded active adult involvement. For example, a sudden need to be taken to the toilet:

*Leaving the circle both co-leaders moved and opened the box... Liam came to me and touched me. "Toilet", he said. I said "in a minute". He had found the mobile phone (a link with his foster carer). Rather disparagingly Denham said it was pink.*

(Session 1)

Liam, despite physical and learning difficulties, was the only child that was willing to access direct adult support at times of need. The circle had just ended and Liam came close and made physical contact. He needed to connect with an adult and asked to be taken to the toilet. This would have



provided Liam with an adult presence and attention away from the group. When not provided with an immediate exit and close proximity, he went in search of the toy mobile phone, which was a particular link with his foster carer. Denham, as he dismissed the mobile phone so disapprovingly, sensed Liam's need to link with his foster carer. Perhaps this was also evidence of Denham's difficulty in the area of Negotiating Transition. His contempt of Liam could indicate that he had split off his need, projected it into Liam and disassociated himself from it. There is a link here to the internal gang formation described by Canham (2002).

Another indication of difficulty in Negotiating Transition was often a sudden increase in activity and conflict:

*The circle ended: Jason and Denham began wrestling with the large toy dog and teddy. They were wrestling separately but were talking about wrestling together. Jason was using the dog as a hammer. He had set the tent and toy dog up so that he was able to drop down on to the dog. I stayed close to Jason and Denham, talking to them about keeping things safe.*

(Session 1)

As the circle ended, Jason began wrestling with the large toy dog and Denham, independently, wrestled with the teddy, both talking about wrestling together. There was a sense in which the gap left by leaving the circle was instantly filled with fighting and a sense in which this was likely to escalate, evidenced by the co-leaders' need to talk about keeping things safe. In the midst of this escalated fighting, Jason was using the dog as a hammer and seemed to have set up a space in which he could drop down or fall and be caught by the dog.

Another means of Negotiating Transition was a move to hiding or withdrawal:

*The circle ended. Eleanor moved and joined the tunnel to the tent putting a blanket over the front of the tent so that she could not be seen.*

(Session 1)

In this material Eleanor appeared to create a transition of her own. By linking the tunnel to the tent, Eleanor created both a space for transition (along the tunnel) and a safe, inside place apart from the group, a space she could be enclosed in. This pattern occurred frequently leading to questions in both the co-leaders' and group supervisor's minds about links to Eleanor's early experiences as a premature baby in an incubator separated from her mother. This seemed to be evidenced by the need to keep herself safely inside of something.

In this first session, another way of Negotiating Transition appeared to be linking with adults:

*As the circle ended, Nelly remained seated beside the co-leader and began to draw a girl. She showed her picture to me and said that it was me. Later, I heard her ask the co-leader if she (Nelly) could colour her picture. The co-leader seemed surprised by her need to ask this. Later, Nelly began to draw a princess.*

*Liam was also drawing some pictures of faces. His drawings were very primitive. His red felt tip went through the paper.*

(Session 1)

In this material, both Nelly and Liam began to draw. Drawing was a familiar experience at the beginning and ending of sessions. The experience of the group would suggest that the children found drawing a containing activity and often appeared to use this as a way of holding themselves together in an effort to manage the ending of sessions. All the children seemed to have behaviours that they used defensively to cope with managing transition and negotiating the end of each session.

In the first session the co-leaders were actively engaged in supporting the children with these transitions. This involved talking to the children, whilst moving along the corridor, about where they were going and how to locate the group room. The co-leaders were deeply in touch with the difficulties the transitions posed and the adjustments the children needed to make in each session. The co-leaders actively communicated with the children, with each other and with the children's foster carers at these key times. Key times proved to be: separating, going through doors, moving in and out of the group circles, commencing free play, the ending of sessions and leaving.

In Susan Reid's (1999) extensive work on children's psychotherapy groups; she called this active communication 'weaving'. Weaving refers to the joining together of threads of experience, actively working to keep the children in mind and creating what Susan Reid refers to as the 'safety net' of the group. This active communication also borrows from the work of Sorenson (2005a) on transition facilitating behaviours.

Later in the group:

*Liam sat on the co-leader's knee. He said that he needed his phone and the children said that they wanted to draw. There was a brief return to wrestling for Denham and Jason after which they were 'sleeping' in the tent. The room was full of blanketed tents, it was quite striking. The room felt transformed, almost entirely covered and all the children were in the tents. It was quite an image. The 'sleeping' went on for some time. Jason lay very close/across Denham. One of them pretended to snore in response to our conversation. Eleanor was very quiet in 'her tent'.*

(Session 1)

There seemed to be some processing of the transition from the circle to free play, in that after the children had negotiated this transition in their own particular way, they seemed to need to be in an enclosed place, 'sleeping.'

They were separate and yet together. The co-leaders' experience of sitting with all of the children 'sleeping' was a powerful one. It appears to be a powerful way of avoiding contact. Picture images came to mind of children sleeping at nursery and we were reminded of the importance of sleeping in the development of the infant and young child.

The emergence of these picture images occurred regularly in sessions with the children. So much so, that the co-leaders came to call them picture memories. There was something important about these picture memories which seemed linked to transition and a holding in mind, providing a transitional safe space in the therapist's mind which the children appeared to be occupying (Winnicott, 1965). The children in these spaces had tentative connection with both co-leaders in a way that felt more than a connection in opposition.

Later:

*Eleanor stayed in the tent and did not come out until a few minutes before the end. She did make some noise with the doctor's kit in response to what we were saying. When she finally came out, the co-leader commented on this. I remembered this very strikingly, but not what happened before or after, an experience that perhaps had some emotional resonance with the experience of the 'picture memory' earlier. Eleanor started to draw a picture with a sun in the corner. Nelly was drawing a princess.*

(Session 1)

Eleanor was physically separate from the group but emotionally connected, as evidenced by the noises she made with the doctor's kit. This extract was included to illustrate the idea of a transition from an inside safe space. A blurring occurred in the mind of the child psychotherapist when Eleanor finally came out. The sequence of events was unclear before her coming out of the tent and afterwards. There was a disturbance and a temporal element to this, highlighting the transitional nature of what was occurring.

Eleanor was moving from a safe 'internal' space into the group as the children came together in a circle at the end of the first group session. This blurring felt connected to Eleanor. The active work of the co-leaders was to keep thinking and stay connected to Eleanor at such a significant transition when the pull in the counter-transference was to lose concentration. The temporal aspects of this will be developed further when exploring the core category of Avoidance/Being in Touch.



Pictures were used to help the children come together, both at the beginning and the end of every session. The intention was that the pictures would help the children link the structure of coming together in the circle of chairs: initially used to help Liam, in that they linked with the use of pictures at his school, they were also found to be useful for all of the children. The calendar was used in a similar structural way; it was located in the group room and marked the dates of sessions, the missing sessions over the Christmas holiday and the sessions afterwards. There were pictures of the children above the calendar. The same pictures were also placed along the corridor to help the children to Negotiate Transition from the waiting room to the group room.

In the process notes of all ten sessions, there were frequent references to the date, time and location of the session, and to the series and the structure of time across the Christmas holidays. There was reference to communication between the co-leaders updating each other in terms of what was happening in the group, for example, after a child had been taken to the toilet.

These frequent references were a way of highlighting group structure and the experience of time; of helping the children not only manage transition but also gain a sense of time and rhythm which is an important feature of transition and an area of development in which the children were weak. It was hoped that this would help the children to internalise the capacity to organise time in this way; this process linked structure to meaning and meaning to structure (Sorensen, 2005a).

The group had a physical frame that provided a structure for the children that they could find repetitive and reassuring. However, they instinctively appeared to fight this structure and aspects of this will be explored further in the sections on Sense of Self and Missing and Loss.

## **2. Presentation and Joining**

This core category encompassed two aspects of the children engaging with the group. Presentation covered aspects that related to how directly each child presented themselves to the co-leaders and the other children; Joining encompassed how the children became part of the group.

Initially, when looking at the focussed codes and core categories, there was an idea that Presentation and Joining were so linked to Negotiating Transition that the two categories could be combined, so that Presentation and Joining became a sub-category of Negotiating Transition. Looking at this question of joining the two categories more carefully, it became clear that it was important to differentiate. Presentation and Joining was distinct from Negotiating Transition as it looked at what happened once the child had negotiated the transition. For example, arriving after a move from 'a' to 'b'. Presentation and Joining included the focussed codes of Finding and Being Found, Meeting and Being Recognised, and Engaging or Attempting to Engage with the Other. These focussed codes covered important aspects of dyadic relationships.

In order to look at how the children presented themselves to the co-leaders and the other children, the focus was on how the children managed the task of joining and starting something new (the group). The immediacy of group work was evident as the children introduced themselves.

*We talked about introductions and Jason shouted out that he knew everyone. We were talking and I said that I thought introducing ourselves was important. Jason said he was Jason, Denham said he was Denham, I introduced myself and Liam said, Liam and his surname, looking shyly and directly at me. As Liam spoke, Denham had started to say, 'you wouldn't believe how many cousins I have... twelve. Eleanor said, Eleanor very quietly. The co-leader said that she didn't think she heard that and Eleanor repeated her name... Denham was talking about there being thirty six people in his family. Nelly introduced herself... Denham said that he had a baby brother... and the co-leader introduced herself...*

(Session 1)

This was the first time the children came together in a circle and formally introduced themselves. Introduction involves presenting oneself to others. Looking at this section of material, in relation to Presentation and Joining, we see how the children attempted to manage this. Jason sought to avoid introductions by loudly shouting he knew everyone and needed some support in letting the group know "I am Jason." Denham, Liam and Eleanor managed to introduce themselves but before Nelly could introduce herself, Denham forcefully interrupted twice and sought to present himself repeatedly in the context of his large family of origin. He was excitedly compelled to locate himself in a crowd of people representing his extended family. Denham's eagerness would appear to mask an anxiety about being separate; he appeared to present himself inside the protective shell of his extended family. He also talked about a baby brother. This was the first time the child psychotherapist had knowledge of Denham's baby brother. As Denham talked about his extended family, an earlier experience of him during the SSAP came to mind. Denham's story stem completions were

filled with stories of the identified child's upset at not being able to live with his family of origin.<sup>26</sup>

How the children came together was important. Susan Reid (1999) has argued that the task of the group was to become a group and belonging was a key element of this. Looking at how the children presented themselves and came together was a major core category in this research project.

It was clear that the way individual children presented themselves and joined each session was not necessarily straightforward:

*Just before the start of the group I looked out of the window and saw Jason racing across the car park. Mrs. J., his foster carer, followed him and they came into the building together. A few minutes later, I saw Nelly racing towards the door, running 'full throttle' across the car park. Mrs. N. was behind her.*

(Session 8)

This suggests that the children were eager to come and join the group. However, it seemed that the children could not sustain this apparent enthusiasm:

*Eleanor ran down the corridor but stopped at the door.*

A little later:

*The co-leader was saying that Jason had sat down in the middle of the corridor on the way to the group room. Jason raced across the room to the dressing up box and found the Spiderman mask. I was struck by his entry; I talked about the circle... about gathering in a*

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<sup>26</sup> Denham's family of origin were remarkably absent from both his foster carers' accounts of him.



*circle as there was much to think about. I was thinking about Jason sitting down in the corridor... I said that I had seen Jason running into the building with Mrs. J. following him and that the co-leader had said that he had sat down in the middle of the corridor.*

(Session 8)

What inhibited Jason's ability to sustain his apparent enthusiasm for joining the group? Jason's enthusiasm seemed to get lost along the corridor. This experience appeared to be repeated as Jason raced across the room. He seemed to manage this by finding and holding on to the Spiderman mask. This would suggest that Jason was anxious in both the corridor and group space. His anxiety could be related to joining and presenting himself to the group. The use of the Spiderman mask provided him both with a means of doing this and of protecting himself in the process.

Later in the eighth session:

*We started talking about the calendar and the approaching ending of both today's session and the ending of the group itself. The counter-transference experience of the group of children was that starting something was inevitably linked to ending.*

(Session 8)

Linking to both the calendar and the ending set the children's difficult experiences and anxieties in the present context in which they occurred, in the context of the group with its limited time frame. In working with these children, the task was not only to contain their anxieties (Bion, 1962b) but also to provide them with a holding environment (Winnicott, 1965). These were two separate provisions (Britton, 1998).

The children had missed opportunities to develop in both of these areas (containment and the holding environment) and by containing their anxieties ('it is hard') for example, by saying that thinking about the ending was hard and linking this to the structure of the calendar representing the

holding environment, their underlying, overwhelming anxiety could be addressed. One of the difficulties the children clearly had was joining and presenting themselves in a new situation. This could be linked with how Nelly had apparently presented herself when she joined the group in an earlier session:

*There was another knock at the door and the co-leader returned with Nelly and her foster carer. Nelly went straight to a chair. She was still and I did not notice her for a moment. It took me a little while to realise that she was sitting on the co-leader's chair. Nelly was sitting, smiling and had folded her arms in determination and seemed held by this, eagerly awaiting my response. I talked to Nelly about it being the co-leader's chair that she was sitting in and that seemed important. I talked to Nelly about where she was sitting and my thoughts about that; that she seemed to be standing her ground.*

(Session 6)

Thinking about Nelly's occupation of the co-leader's chair psychoanalytically, Winnicott's (1965) notion of a 'false self' and Meltzer's (1975) ideas of 'adhesive identification' come to mind. These psychoanalytic ideas can often be used to describe the children's behaviours and the absence of a reliable, predictable relationship.

In one sense, it appeared that Nelly had been able to present herself and join the group, but she was only able to do this by occupying the position of another (the co-leader) and opposing the structure of the group. She took pleasure in being in opposition and reversing the roles of authority figures by identifying with and occupying the role of the authority figure. This behaviour was referred to throughout the sessions as 'connecting in opposition'. Being in opposition enabled Nelly to present herself and join the group. Joining the group in this way was not only an evading activity; it provided her with a means of scaffolding her behaviour (Canham, 1999 and Vygotsky, 1987). This is explored further in the core category, Sense of

Self. A sequence of play followed which gave an opportunity to consider the category Presentation and Joining in more detail:

*Nelly was dressing up as a witch in a witch's hat and a skirt that has similar colours to the Chinese coat she often wears. The colours match. Nelly found the Chinese coat and put it on. She had the whole ensemble. I talked about this, how pleased she was with the witch's hat, the witch's dress and the Chinese coat.*

*Nelly had been helping Jason; she was finding him some trousers... Jason was dressing up, talking about being a vampire. I talked with him about him wanting to be a scary vampire ... He found a vampire cloak. Jason put the trousers on that Nelly had found for him on top of his own trousers. I noticed the size of his feet and was thinking how small he was. Nelly found Jason a vampire apron... Jason was dressing himself, he brought me the vampire apron to fasten and he was asking for help (an unusual experience).*

*Jason had layers on and had finished dressing; he had a finished complete outfit similar in some way to Nelly's. He was, I think, about to present this and Nelly laughed at him. Jason was devastated. It was fast and Nelly's laugh, her response to Jason's outfit, was in many ways indistinguishable from her own expression of excitement and pleasure at her own outfit, but she was laughing at Jason and the impact of her laughing was clear. I talked to Nelly and Jason about how there were left out feelings and how hard it was to feel left out and that one way of managing the left out feelings was to give them to someone else. Nelly was saying that she did not feel left out. "I'm not left out," she shouted.*

*Jason took off his trousers and then his outfit. He found a Spiderman mask and a Spiderman top. He was struggling a little. I talked about all the different feelings that were around, the loving feelings and the left out feelings.*

(Session 6)

Jason was in touch with his wish for an identity, for recognition. He was about to show and present himself in a way that he had seen Nelly do so often in the group. Nelly laughed and Jason collapsed.

At the point when Jason was about to show and present himself Nelly was in touch with her own anxiety. Nelly could not tolerate the anxiety of presentation and the perceived threat of humiliation she anticipated in relation to this; the fear of presenting herself and of being rejected, of not being recognised. She could not bear this and projected her fear and anger into Jason. By humiliating Jason, Nelly was able to disown her own vulnerability. Clearly Jason was vulnerable to her projections. Jason chose another costume, another identity but did not appear able to own this or present this. This material underlined not only the internal and external relational aspects of Presentation and Joining; it underlined the relational aspects of developing a Sense of Self and identity.

Analysing this extract of material again, with Presentation and Joining in mind, the material was reviewed in other group sessions looking at the way in which Nelly dressed up and presented herself. It seemed clear that Nelly presented herself to 'thin air'; she was not presenting herself to either of the group co-leaders or any of the children. Nelly, it seemed, pervasively avoided this.

In her treatment of Jason, Nelly was actively demonstrating how she had incorporated both sides of the parent/child dyad; the vulnerable, rejected child, as represented by Jason: the other side of that dyad, the response that fuelled her anxiety, the laughing, mocking, and rejecting other (Reid, 1999). This has links with what Canham (2002, p. 115) described as a 'gang state of mind'. Canham defined 'gang mentality', as one in which destructive forces dominate.

The dominant and destructive parts of the self, take hostage what they feel to be those other parts which expose them to feelings of

neediness, littleness and ignorance and they do so by imposing a reign of terror on those other parts.

(Canham, 2002, p. 118)

It would seem that Nelly was continually on the cusp of these gang states of mind. The co-leaders thought Nelly risked being scapegoated by the others as the representative of this tyranny. Of more immediate concern to the co-leaders was Nelly's inability to be needy and to access the help of others. Youell and Canham (2006) ask what is happening in the internal worlds of children who align themselves to these gang states of mind which distort their perceptions in such a way that makes it impossible for them to use available, supportive adults. Nelly needed to be supported in her capacity to present herself and join the group as this was an important and necessary life skill she currently did not possess.

### **3. Sense of Self**

Linked with a child's sense of identity, another important core category was Sense of Self. In the group this was often seen in the context of opposition, when a child claimed the identity of another in terms of space or clothing.

This is demonstrated:

*Nelly was dressing up. She looked like a nurse; she had a nurse's hat and apron on. The co-leader was talking to Nelly about being a nurse; Nelly said she wasn't a nurse. The co-leader was talking about how Nelly had become a little girl. She had put a very small jacket on that did not look like it could possibly fit her but Nelly had managed to put it on. I said that Nelly reminded me of Eleanor when she had put a very tiny jacket on, (the baby doll's jacket) in one of the earlier group sessions. Eleanor came from the other side of the room and put on the jacket. The co-leader was saying, "I think that that was the jacket." The girls were dressing up together, continually changing what they were wearing, wearing the same things. Nelly*

*had her Chinese coat on again. They were seen to be mirroring each other ... standing opposite each other, sometimes wearing very similar clothes.*

(Session 7)

Nelly was dressing up, on this occasion in a nurse's outfit. When the co-leader talked to her about the nurse's outfit, Nelly said she wasn't a nurse. One might wonder whether Nelly had another image or identity in her mind in relation to the nurse's outfit. Was Nelly rejecting the identity of a caring adult or merely opposing the co-leader in a way that was familiar? Nelly, becoming a nurse in the nurse's outfit and denying this, could be seen as developing a Sense of Self in opposition. This is explored further below.

The co-leader began to talk about how Nelly seemed to have become smaller; she seemed more vulnerable, less defended and less of a pseudo adult, challenging for control. Nelly put on a very small jacket which did not look like it could possibly fit her. This reminded the child psychotherapist of a similar experience with Eleanor wearing a different tiny jacket. Eleanor joined Nelly and put on the jacket in question and the co-leader acknowledged this. The two girls were then able to play at dressing up together in such a way that seemed unusually connected. Both Nelly and Eleanor appeared to be exploring a Sense of Self (a more infantile Sense of Self) in relation to each other.

Whilst Nelly and Eleanor were engaged in dressing up, Jason joined Denham in the tent:

*Jason and Denham were in the tent. Jason wanted Denham to join in with what he was doing. Denham said "I am not gay". Eleanor began saying to Denham "your dad kisses you, you kiss your dad." Denham said he did not have a dad, he was fostered. Nelly also said that she was fostered. I was commenting to the co-leader and the group on what they were saying.*

(Session 7)

This section of material is included here because at the same time as Nelly and Eleanor were playing together and exploring aspects of self, Jason and Denham came together in the tent and seemed to be exploring a number of issues also related to a Sense of Self.

Jason wanted Denham to join in his play. Denham seemed to have a picture of what this might mean in his mind and emphatically stated that he was not gay. Eleanor responded to this from outside the tent by suggesting to Denham that it was okay for boys to be close to other boys because they were close to their dads (kissing). This led Denham to say that he had no dad, he was fostered and Nelly said that she was fostered too. This material is interesting because four of the children in the group were exploring sexuality, issues of parenting and being fostered. This was an unusual event.

One might specifically wonder about Denham's need to emphasize that he was not gay and his Sense of Self in this regard. Denham's assertion could be seen in the context of the domestic violence in his family of origin, the difficulties his older brothers had in relation to managing their aggressive feelings and their sexuality. It was interesting in thinking about Denham's family of origin, when Denham said he did not have a dad. In the context of his family of '36' there was no mention of a father. Denham did have a father serving a long prison sentence. The split between having no father and being fostered was perhaps an obvious one, but in this context did not seem clear. This material and the external links it generated raised a number of issues. One was the development of a Sense of Self in relation to sexuality and the other was of the development of a Sense of Self in relation to gender in the context of domestic violence and male stereotyping; for example black, male, gang members.

Following this, Nelly was able to say that she was fostered and we were left wondering what Eleanor might be thinking in relation to this, given that she had introduced the idea of dads.

The session continues:

*Nelly was emptying the dressing up box. She seemed to be looking for something. Jason (her twin?) had moved to the group box and seemed to have started to empty the box in a way that felt similar. Nelly had climbed into the dressing up box and was giggling excitedly, dangling her legs over the edge.*

(Session 7)

Later in the session:

*Nelly was playing with the story stem box. She was organising the play people. She was playing close to the box and I was thinking about its previous use. This is the first time that the story stem box had been used in this group. Jason came up to Nelly 'robbing her'. He took the bag of animals out of the box.*

(Session 7)

Nelly and Jason appeared to be separately engaged in the activity of emptying; Nelly's emptying was in search of something and once she had emptied the box, she climbed inside, giggled and dangled her legs over the side. One might think about what Nelly was connected to when she was in this rather infantile, excited state. Nelly might be connected to an idea that she could be an excited baby that somebody might look after, although given her resistance in the area of being cared for she might merely be connected to the idea of being an excited baby with no parent. This exciting experience was not developed. It could be similar to her repeated experiences of presenting to thin air (Session material on p.130) in that she was not confident that her overtures would be recognised and responded to by an interested and caring adult.

Exploring this material further in thinking about a Sense of Self, Nelly's use of the story stem box was fascinating as it was not until this session (Session 7) that the children in this group were able to use the story stem



box at all. The box could represent a link to the children's experience in the introductory stages of the group, a link to early experiences of transition into the group and more generally experiences outside. In the first session Nelly had, with determination, said she was not going to use the story stem box and Denham, in response to this, had said that he was breathless in relation to telling his never ending stories in the SSAP.

The children often used trickiness when presenting themselves and conveying a Sense of Self or identity.

*... The children seemed to have come together. Denham was standing and talking in an American accent in a way that seemed gangster like.*

*Denham started to roll up sheets of paper. He wanted sellotape and came close to me while I gave him pieces of sellotape and he began making something, cutting the paper... He wanted to use the scissors - I worked with him - he seemed to be making something that became a gun ... the co-leader and I were talking about Denham wanting to make a gun – thinking together about why he might need a gun. Denham said he was a soldier in the Second World War.*

*There was a long sequence with the paper. I couldn't think and did not want to co-operate with him in a way that was without thinking... I felt very stuck – immobilised.*

(Session 4)

The children in the group had come together and Denham had started to make something and seek assistance. The group was engaged in Denham's craft activity. Denham was making a gun (in the interviews with his foster carers it became clear that Denham was not allowed to do this at his foster home). The co-leaders began talking about the gun and why Denham might need a gun. Thoughts of his earlier gangster presentation

came to mind. Denham quickly insisted that he was a soldier in the Second World War and not a gangster.

The counter-transference experience was of being unable to think, perhaps evidenced by the co-leaders need to talk about the gun. The counter-transference highlighted Denham's trickiness in his wish to explore themes of gangsters and guns in a hidden and covert way. This was disturbing in a way that stopped thinking and led to unwillingness on behalf of the co-leaders to engage in an activity that was devious and indirect. Denham needed to think about guns and gangsters which seemed linked to his father's gang history. Denham appeared to be in projective identification with a murderous and phallic object.

Denham's Sense of Self seemed clearly located in a sense of unmanageable catastrophe. Thoughts of Denham's extended family came to mind. His Sense of Self appeared to be located in being lost in an overwhelmingly dangerous situation.

There was evidence to suggest that all of the children at some time used trickiness as a way of exploring different aspects of themselves and their developing Sense of Self and identity. Trickiness in this context refers to the presentation of something as one thing when in fact it is another. This could be a straightforward way of trying to present a Sense of Self that felt vulnerable or exposed. It could be a means of tentatively practicing presentation when anxious, a positive move in the service of development. Or it could be a more perverse presentation linked to identification with perverse experiences with which the child might need further help.

Another area of exploration in relation to a Sense of Self was linked to sexuality. Sexual themes frequently emerged in the group. They often occurred fleetingly and seemed disconnected.

*Jason took a baby doll from the box and examined its genitalia. He was excited by this. I commented that he seemed to be very interested in bottoms.*

(Session 4)

It was often hard to capture this kind of material which clearly seemed to be an exploration of gender and sexuality. Helping Jason with this was important, but because of the level of excitement and disconnectedness it seemed hard to support him.

Liam tended to present his Sense of Self and sexuality very differently:

*There was a knock at the door and Liam arrived with Mr. L. He came into the room rapidly and sat near me. I spoke to him and he immediately said “shut up.” He was unusually physical... I moved near to him trying to get him to stop and think. This seemed more difficult to do than usual. He said “shut up” repeatedly and was kicking the group box. I moved close to Liam as he had moved away, trying to get him to stay connected with me and think.*

*Liam said “shut up” again. He quickly moved away from me and shouted “sexy.” He seemed giddy. I said, “Liam was saying that word again, sexy. It was an excited word and there was something that needed thinking about.” Liam joined Jason and they were getting excited. The boys were physically close, wrestling but also lying together with their bodies entwined as if they were one – not separate.*

(Session 4)

In this extract of material Liam appeared to be demonstrating how he managed both his separation from his foster carer and his subsequent entry into the room. In doing this we were given a glimpse of Liam's Sense of Self. Liam's Sense of Self seemed to be located (particularly at times of stress) in aggression and loud opposition; the need to loudly shout “shut

up” moved into a more sexual arena. Liam appeared to use sexual swear words as a more heightened means of aggressive joining. Liam, in this excited, sexualised, aggressive state joined Jason and they became increasingly excited together.

Interestingly, it was Liam that appeared to instigate this behaviour. In many ways, Liam appeared more accessible in this session than Jason. He could demonstrate his feelings, which gave the co-leaders and other children in the group a sense of his difficulty. Even though we might be less likely to interpret Liam’s feelings in the context of the group or his family of origin, we were able to interpret his feelings in relation to some sense of difficulty that might be hard to access. Liam could be supported with both his inaccessible difficulty and how he might be helped to manage his feelings in relation to this; his anger, aggressiveness and sexual provocation.

An aspect of Liam and Jason coming together could be linked to difficulties they shared in separating and relating. They engaged in wrestling. They seemed merged and not separate. One might speculate whether the merging or lack of separateness was linked to a lack of Sense of Self in relation to an individual identity or their Sense of Self in relation to others. Whichever the case, their Sense of Self was likely to be vulnerable at times of separation.

Continuing:

*Liam and Jason were wrestling. I talked about the need to sit in the chairs, that there were things we needed to think about. Liam moved away from me. He was racing around the room. Jason came and sat on the co-leader’s chair, there were several chairs he could sit on. He clearly sat on the chair intentionally as he said he was a grown up now. There is a sense that there was something unmanageable that the children needed help with.*

(Session 4)

Both Liam and Jason used opposition as a means of anchoring themselves and giving themselves a Sense of Self or identity. In this extract and indeed, in the session material that preceded it, there were deep-seated anxieties (Klein, 1946). The counter-transference experience was one of overwhelming but unidentified need that ignited a very active kind of desperation and aggression. One might wonder, given Liam's physical and learning difficulties, about the nature of his state of mind and what he might be projecting in this instance.

Exploring the material in relation to the core category Sense of Self, one realised that for all children, a Sense of Self or identity was often rooted in competition, a borrowing of identity, twinning or blurring.

For example:

*Nelly moved to the dog and hugged it affectionately. Nelly and Jason were together; there was something happening with the dog which was very fast and difficult to find the space to address: there was a competition for the dog – a hugging and a leaving out. It felt powerful and I was trying both to give it an order and maintain my thinking. An affectionate holding onto, and a being left out, a rapid shifting...*

(Session 6)

A blurring occurred between Nelly and Jason that contributed to the thinking about Nelly. Nelly appeared to be taking over Jason's identity. Thoughts of merging between Nelly and her twin brother, Mark came to mind.

This mirroring of someone else's identity was a common occurrence in the group and raised questions regarding anxiety in relation to belonging and occupying one's own place, holding on to a Sense of Self and one's identity. Occupying the identity and position of another takes one into the territory of what Meltzer (1986) describes as adhesive identification. This involves mimicking someone in an adhesive way rather than relating to

them. Meltzer's work on adhesive identification is relevant when thinking about the refinement of identification processes.

Undertaking further theoretical sampling and, exploring this sense of blurring in relation to a Sense of Self, it was apparent that this blurring of identities also tended to occur in the minds of both co-leaders particularly with Jason and Denham as it became difficult, at times, to distinguish between the two. The co-leaders would often be left struggling to remember both the sequence of experiences and who these experiences related to.

Although this blurring of experiences also occurred in relation to the other four core categories, it is included here because of its links to Sense of Self and identity. Blurring could be a way of Negotiating Transition, of Joining and Presenting to the group, and of muddling time and reality. It could be argued that this blurring might resonate with the children's own experiences of difficulties in remembering past events. It was a direct counter-transference experience of the co-leaders, and could be linked with high degrees of projective identification in the group.

#### **4. Missing and Loss**

At the beginning of the coding process, one of the first thoughts had been that the theme of Missing and Loss, resonating in the first and subsequent group sessions, were not immediately apparent in the emerging codes and categories. After analysing the codes of Avoidance/Being in Touch, the intensity of the presence of Missing and Loss was revealed. The relationship of a number of the initial and focussed codes to the theme of Missing and Loss became more apparent. Linking clinical experience of the group and the coding process allowed the recurring aspects of Missing and Loss to become increasingly visible.

A number of initial and focussed codes created a combined core category of Missing and Loss. These included: Negotiating Absence, A Sense of Non-Presence, Forgetting, Leaving Before Being Left and Playing Dead.

Returning to the data with this core category in mind, an example of Missing and Loss was found in material from the first session:

*Jason and Denham were in one tent and Eleanor and Nelly were in the other. Nelly came out and returned to the dressing up box. Nelly was commenting on the broken necklace. She asked where the 'not broken' one was. She put on sunglasses and later a nurse's hat. Nelly seemed on the verge of the other children's activity. My head was filled with something that felt hard to think about. I struggled trying to think, to capture and to hold onto something.*

*Liam needed the toilet. He had asked the co-leader and the co-leader took him. Eleanor was quiet in the tent. Jason was wrestling with the large toy dog. I said there was something hard to think about. Something about missing and pausing a moment, something about brothers?*

*A few minutes later the co-leader returned with Liam. I was talking to the co-leader about what had been happening whilst they were out of the room. I said that I had been thinking about something hard. Nelly said, "Missing brothers."*

(Session 1)

This highlights the internal world difficulties the children needed help with to identify and structure. These difficulties appeared to be connected to an experience of loss and an internalised experience of disappointment that seemed linked to all the children in the group. Nelly appears to be acting something out for the group when she focuses on the missing necklace.

Nelly seemed to be convinced that she would only find broken necklaces and the co-leaders had hidden the “not broken one.” The counter-transference experience was overwhelming in that there was a struggle to think and hold onto the experience.

Perhaps Liam was in touch with this experience when he needed the toilet. Whilst the co-leader and Liam were out of the room there was a struggle to capture what was happening. When the co-leader and Liam returned there was a sharing of experience as the child psychotherapist began to talk about the difficulty in thinking about something hard. Nelly interrupted this by joining what had been two separate thoughts in the child psychotherapist’s mind, saying “missing brothers”. In the group it had been very hard to think and ‘missing’ and ‘brothers’ had been hard ideas to reach; it had been difficult to articulate thinking.

We might wonder when Nelly joined “missing” and “brothers” what was in her mind. Did she connect the words in an attempt to demonstrate her need to occupy a pseudo adult role, to once again take charge, to demonstrate her conviction that adults could not be relied on? This perhaps links to the magic quality “missing brothers” conveys.

Was Nelly’s ability to join, what were two unclear but separate thoughts in the child psychotherapist’s mind, into ‘missing brothers’ linked to her own experience, an example of Nelly beginning to think about absence; her absent twin or perhaps even more painfully her absent, adopted younger brother? Whatever the reality of this, what was clear from the group was how much turbulence and difficulty in thinking, needed to take place in the child psychotherapist’s mind before Nelly could think about absence. The idea of “missing brothers” and missing and loss more generally was picked up in the co-leaders’ de-briefing meeting at the end of the first session (Appendix G).

Material in the fourth session illustrated further the difficulty the children had in relation to thinking about Missing and Loss. This session followed



the third session, the only session when one of the children, Eleanor, was absent from the group. Throughout this fourth session there was an unmanageable difficulty. Eleanor arrived late and both before and after her arrival, indeed throughout the session, the difficulty continued. Eleanor's absence the week before and the experience of missing and sense of loss that her absence evoked appeared difficult to process.

Eleanor arrived:

*The co-leader took Mrs. E. back to the waiting room. The children's reaction to Eleanor's arriving felt extra-ordinary. Liam leapt off his chair, thumbs up... cheering. When the co-leader returned, I talked about the children's response to Eleanor arriving, asking Liam to show her... I talked about why Eleanor had not been here last time, letting the children know that there had been an accident on the motorway. The process of trying to get this information across seemed long and difficult. Nelly said that she had been stuck in traffic and Denham began to tell an awful and quite gory story about a road accident in which someone had lost their leg. It was hard to keep focus and I tried to talk about Eleanor's foster carer being stuck in traffic, saying Eleanor had been stuck at school, waiting to come here. I tried to do this in a way that did not deny the accident but did not get caught up in such awful imagery. I talked to Eleanor about the worry in the group last session, that Eleanor was somehow waiting in the waiting room and the co-leaders were not doing their job properly and had not gone to collect her. I said that Eleanor was missed last time and there was some worry in the group about this.*

(Session 4)

We see the children exploring Eleanor's place in the group. The other children clearly missed her and had been disturbed by her previous absence and lateness in arriving for this session. There was a warm and rapturous response to her arrival that seemed important to note and when

the co-leader returned, Liam was asked to demonstrate his response to her.

It was possible to talk about Eleanor's absence, but this was an extremely long and arduous process. Nelly seemed to manage Eleanor's absence by locating herself in identification with Eleanor, saying that she too had been stuck in traffic. Denham got lost in a long account of a road traffic accident, which resulted in someone having their leg amputated.

There was a need to locate where Eleanor had been, and what she had experienced, during the course of the last session. She had been stuck at school and her foster carer had been stuck in traffic on the way to collect her. Eleanor's position in the group was underlined by this experience. She was made aware of her importance to the group, perhaps a new experience for her.

An example of the core category Missing and Loss occurred in the middle of Session 6 which was the last session before the four week Christmas holiday:

*Denham was in a strikingly isolated position for most of the time. I repeatedly picked up his trickiness, his use of the gun, trying to think with him about the difficulty. Eleanor and Nelly were together... Liam and Jason were together... Denham was behind the tent, using his gun like an assassin. He was shooting Nelly, he said.*

*The co-leader began addressing what the children were doing – she was expressing her thinking about Denham wanting to shoot Nelly and talking about how Denham had previously wanted to join Nelly in the tent. Nelly had excluded him and wanted Jason.*

*The co-leader was working with me, picking up my focus on Denham and his gun and exploring this. I was interested because we were actively working both together and separately. Often, the*

*experience is of finding it difficult to think and indeed we regularly came together and talked when it was hard to think using each other as a way of joining to strengthen thinking.*

*There was such a lot of work going on in the group. Eleanor had started to draw a multi-coloured picture. Denham was showing me a loose tooth. Eleanor showed me her teeth. She had "two teeth that were loose," she said. Liam was playing at being dead. Nelly came to take care of him... she went off to find the doctor's kit. Jason came to tend Liam in his Spiderman outfit and Eleanor found a nurse's hat, I said we had a Spiderman, a doctor and a nurse. They were all looking after Liam.*

(Session 6)

This extract of material was rather striking; there was a coming together of the co-leaders and later a coming together of the children that followed the earlier exploration of loss (the missing tooth). Loss in its different forms - Liam's more primitive loss or the loss of losing teeth (a more accessible loss for latency children), was an important component of this coming together. There was space for vulnerability (represented by Liam) and for looking after.

Nelly, who had maintained a position of not looking after anyone, was able to look after Liam. Liam became the 'baby' of the group. Previously there had been neither space nor tolerance for babies. The children were now thinking and working together. Indeed the group felt like it had become a work group.

The term 'work group' was developed by Bion and links to what he described as 'work group mentality' (Bion, 1961, p. 73). This highlighted group dynamics in which group 'members are able to manage their shared tensions, anxieties and relationships, in order to function effectively; the outcome is a capacity for realistic hard work' (Bion, 1961, p. 157).

The children had come together as a group and were able to look at areas of difficulty and work on these; Nelly and her capacity to care for others, and the group's tolerance and exploration of babyhood, a difficulty for all group members. The children were collaborating, sharing and exploring areas of difficulty that were characterised by engagement with difficulty, co-operation and work that promoted personal development.

During this session, some themes were to emerge that had not been present in previous sessions and would not appear again in the sessions that were to follow.

For the first time, affection between the children was visible. There was the emergence of concern for absent siblings and all children were actively involved in looking after Liam. The co-leaders were working together as a working couple (Canham and Emanuel, 2000). There was space to think and explore. It was possible for the co-leaders to track and address the children's activity, and for the co-leaders to work both together and separately. The co-leader had been voicing her thoughts about Denham wanting to shoot Nelly and talking to the children about how, in the previous session, Denham had wanted to join Nelly in the tent and Nelly had excluded him; Nelly would not let him into the tent and had wanted Jason. The experience of being left out and being punished for this could be thought about, experiences could be linked; sessions could be linked.

The co-leaders were a 'working couple' and the group was 'becoming a group' (Reid, 1999). This was striking, given that this was the last session before a four-week gap for Christmas and the New Year. The group was being repeatedly reminded of the four-week holiday and that they had only four sessions in the New Year before the group ended.

As we moved towards the end of the session there was a sense of intimacy and sharing. The children were relating to both co-leaders and to each other. We might wonder what had facilitated this move towards intimacy, sharing and a work group mentality (Bion, 1961). At this time the group had

achieved its aim and had 'become a group' (Reid, 1999). Becoming a group offered the children acceptance and a sense of belonging and provided a 'safety net', which was a particular form of containment that was the group (Reid, 1999).

We can now look at a section of group material in which the experience of Missing and Loss was actively avoided and a kind of re-enactment occurred.

Immediately before Session 8, Eleanor's foster carer had telephoned to say that she had received bad news and was distressed. She said that she had not slept and was aware that there were only two sessions left and that it was important that Eleanor came to her session. It was suggested that if she felt safe to drive she could bring Eleanor. Mrs. E. said she was not sure if she could manage the foster carers' group. She was told that if she came, a space would be found for her.

We pick up Nelly and Eleanor in the middle of session 8:

*Nelly was initially in the tent with Eleanor and then she moved into the other tent filling it with cushions. She had the blue soft blanket. Despite this, there did not feel to be enough blankets, cushions and soft holding spaces in the room today. Eleanor had taken the doll's bed and had climbed into it; I was surprised that she could fit in. Nelly took the other doll's bed into her tent to use as a door to stop others coming in. Nelly in her tent seemed to be mirroring Eleanor in both her activity and in her notices to keep others out and keep quiet.*

Later in the session:

*Nelly was moved out of her tent by one of the boys. She couldn't bear to share her tent with him and seemed furious. She went into Eleanor's tent. Eleanor resisted her; she made it clear to Nelly that*

*she needed her own space and had put signs up outside. Nelly ignored Eleanor's protests and forcefully moved in. Eleanor was ousted and I can picture her lying underneath a chair crying. The co-leaders were thinking together about Eleanor's feelings. Nelly was not listening. Eleanor's upset was very apparent but Nelly was unresponsive, clear that she was not going to care. Nelly seemed more distant, less playful, more driven.*

(Session 8)

This painful extract raised much thought. There was intense emotional activity and the children were clearly in touch with both the ending of the session and the ending of the group. At this point there was a fierce competition for space; a re-enactment perhaps of early deprivation and trauma. The cycle of early deprivation was repeated here and we saw both identification with the aggressor (Nelly and the boys) and what it felt like to be the victim of ousting and deprivation (Eleanor). Nelly is identifying both with the aggressor (Freud, A., 1992) and displaying what Gianna Williams (1997b) would describe as aspects of 'double deprivation'. These are mechanisms of defence that Nelly utilises to protect herself from hurt and fragmentation.

Later:

*The group was quiet, the children engaged in different things and the co-leader noticed and commented on this...*

*As the end of the session approached Denham was in his vertical tunnel. He was upside down in a dangerous (precarious) place... Liam started to get agitated as the end of the session approached. Jason was playing at being dead and Liam was trying to revive him. Denham was drawing attention to a back injury. This had happened last session at this time and the co-leader and I were talking about this. This felt different to Jason's playing at being dead in that Denham portrayed his injury as real, serious and crippling, the result*

*of an accident that could have been avoided. The co-leader and I were talking to the group about this.*

*Denham was carefully tended to by Liam and Jason who seemed to be working together putting bandages on him. This went on for some time before Denham left the boys and put himself in the crab-like, upside down position.*

(Session 8)

The children in the group were quietly engaged in activity but as the ending of the session approached we saw a dramatic change of focus.

Denham was standing upright in the vertical tunnel, a familiar occurrence for Denham. This time however, Denham's position in the vertical tunnel felt dangerous. Liam picked up Denham's precariousness and became agitated and in touch with the ending of the session. Jason was playing at being dead and Liam tried to revive him. In the midst of this, Denham attempted to draw attention to a real pain he had in his back. Both co-leaders were trying to make sense of when Denham had actually hurt himself and linked this with a similar experience in the previous session. Denham seemed to be in touch with a real, earlier experience of injury and his play in the vertical tunnel felt like a live re-enactment of this; a re-enactment of being in the presence of an object that did not sufficiently protect him.

Both Liam and Jason became in touch with Denham's experience and tried to take care of him and bandage his wound(s). They appeared to be identified with helpful internal objects. Denham became omnipotent and would not allow himself to be helped. He recreated a situation in which he was in an exposed and vulnerable position in which he could be hurt (the crab). All of this seemed connected to the ending of the session and the imminent ending of the group which re-evoked earlier experiences of Missing and Loss.

The co-leader in her session notes continues:

*During the session I found myself feeling short of breath, which seemed to be getting worse. It felt like there was no air in the room and I could not access the air there was. I think I mentioned to the co-leader that I felt short of breath and thought I must be getting a cold. The co-leader gave me a knowing look and I knew she wanted to link my physical state to the difficult session. I was sure this was not the case.*

*I could acknowledge that it was a difficult session and I had found it particularly difficult to think both in the session and afterwards. I described to my co-leader that it was like something hovering above my head but not coming down far enough to access.*

*I did not get a cold and the next day felt fine.*

(Session 8)

The impact of what Missing and Loss might mean was clearly visible both for the children and the co-leaders. The co-leader's description of her shortness of breath; that "*it was like something hovering above my head but not coming down far enough to access*" could be seen as a concrete example of a re-enactment of the co-leader's counter-transference of what the ending might feel like for the children in the group (Bion, 1961). It could be considered in terms of counter-transference of impending terror/panic about survival, nameless dread.

## **5. Avoidance/Being in Touch**

In the initial coding of the group there were two prominent, separate core categories: Avoidance and Being in Touch. These two categories accounted for over a quarter of the 809 codes. In analysing the data, Avoidance and Being in Touch often seemed to occur together and seemed like two sides of the same coin.



Re-examining the data, it proved impossible to separate them. Indeed, Avoidance and Being in Touch seemed to capture something essential about the children's way of relating. In the process of analysis these categories were quickly combined into one core category: Avoidance/Being in Touch. Work began on identifying and defining these two aspects of the one core category. This proved surprisingly difficult.

The nature of the difficulty was unclear until, as part of the background reading to this clinical research project, the researcher studied all of the Robertsons' Films (Robertson and Robertson, 1968).

One interesting sequence was to have a striking effect: the bath time sequence in the film about Thomas. Thomas was a boy, aged 2 years and 4 months, who spent ten days in foster care with the Robertson family. It is bath time and we see Thomas apparently enjoying his bath. However, as he got physically close to Joyce Robertson he pulled away. According to Joyce Robertson, Thomas seemed in need of 'mothering care', Thomas found it difficult to accept this care because of the loyalty he felt to his mother. The sequence was dominated by Thomas' almost simultaneous attempts to get close and to pull away.

The interplay of avoiding and getting close was striking and it appeared that in the intimacy of bath time, Thomas was caught up with (at least) two experiences: bath time with Joyce Robertson and bath time with his mother; the here and now experience with Joyce Robertson and the 'memory in feeling' (Klein, 1957) of a past experience with his mother. This appeared to be a very bodily experience and stirred up memories of infant observation; the way in which infants regulate excitement, often in relation to their experiences with their mother.

The sequence with Thomas would not have been so absorbing had the process of identifying aspects of this core category not been taking place simultaneously. It highlighted the pertinence of this extract of film in relation to this core category. Defining these two categories had been proving

surprisingly difficult. Watching the film triggered connections between the categories and understanding these connections, and the time element involved, which made capturing these ambivalent aspects possible.

Avoidance/Being in Touch frequently seemed to occur simultaneously. This was a light bulb moment and although it was hard to articulate and evidence, there was a thought that something important had been captured. Whilst considering observations of Thomas and of the Robertsons' films more generally and analysing the process notes extensively, this core category seemed to come to life.

Later, during extensive theoretical sampling of the process notes, it became clear that avoidance was the easier aspect of the core category to identify and clarify because it was more visible. Avoidance often involved an interruption; a cutting off or a physical moving away that was apparent, a defensive shutting out, for example, an absented empty chair at the beginning or ending of a group session.

Being in Touch seemed less straightforward; Being in Touch for the children was often linked to an emotional experience, to a feeling of being in the moment, an awareness of absence, an ability to glimpse one's vulnerability, a quieting or an awareness of missing. This could precede avoidance and often trigger it.

Looking at the core category in more depth, in an attempt to perceive variables and inter-relationships (theoretical sampling), the data was returned to with the core category of Avoidance/Being in Touch in mind. This is illustrated in the following session:

*Jason entered the room wearing his space pyjamas and his Spiderman dressing gown. Jason began saying that he was wearing pyjamas as he had been doing karate at school. The suggestion was that Jason did karate and had been demonstrating this at school earlier. Jason was holding on to the big white dog, wrestling it to the*

*ground. He was talking about the hair coming off the dog, "like a real one", I said? I said that the hair comes off the dog like a real one... this seemed to be a repetition of experience for Jason; his previous foster carer had a similar dog.*

*Jason started to talk to me again about wearing his pyjamas; Jason said that it was pyjama day at school and that he hadn't been doing karate at school. I said that he had wanted to trick me and that he sometimes did that when there was a difficulty.*

(Session 4)

There was a distortion of reality that occurred before Jason could explain why he was wearing his pyjamas at school. Jason held on to the big white dog, wrestling it to the ground in a way that had become very familiar. He noticed and began to talk about the hair coming off the dog. Staying with the experience of the hair coming off the dog "like a real one" became not a question but an interpretation, an explanation and a linking of experiences. Linking the hair coming off the toy dog with the experience of the hair coming off a real dog, I was in touch with my counter-transference experience and a sense that Jason was in touch with an earlier positive experience of his own. The counter-transference experience would suggest that Jason linked this to a past experience with a live dog.

We encountered avoidance; what might be described as Jason's trickiness; how he presented himself to the group. This was quickly followed by being in touch with a previous experience. Being in touch in this way enabled Jason to begin to talk about why he was wearing his pyjamas and dressing gown. It was pyjama day at school and he had not been doing karate. It was then possible to talk to Jason about the experience of avoidance and the function it served in that it helped Jason to manage the difficulty of joining the group and presenting himself.

In this extract an experience of being in touch occurred and was only apparent by tracking Jason's interest in the hair coming off the dog. There

was an experience of loss encapsulated in his activity that he was able to bring non-verbally to the group. It could have been easily missed. His capacity to be in touch seemed to occur, albeit fleetingly. The experience of being in touch was often easily and rapidly lost. Acknowledging the experience of being in touch was harder than recognising avoidance. This would appear to link to the children's inability to think about absence and the implication of this for their future development.

An extract of material from the process notes of the last group session before the Christmas holiday is included as an example of the core category.

Jason had not yet arrived:

*There was a knock on the door. I opened the door to find the receptionist with Jason and Mrs. J., his foster carer. Mrs. J. said that they were a little late. There had been a gas explosion and Jason and his foster carer had been held up by the resulting build-up of traffic. I thanked her and she said that she would collect Jason later... Jason entered the group room looking rather sheepish.*

*Jason stood for a moment and then started to talk about the explosion and his little brother being hurt – his little brother was at the hospital, he said. Unusually for Jason, he sounded as if he had a speech difficulty ... I tried to think with Jason about what he was saying - he had started racing, moving rapidly around the room. I tried to stop his racing, to calm him, to hold him physically still. I put my hand out gently to stop him running around and began to speak to him; I said that he was going to a party afterwards – with his brother he said, with Luke. I said, with Luke, his older brother. I talked to Jason about what his foster carer had said and that she was worried about getting stuck in traffic on the way to the party afterwards. Jason was saying that it was a trick; I was thinking a trick that he had got caught up with...*

*Jason hugged the soft toy dog affectionately, which is unusual, he usually wrestles with the dog. He moved around the room finding familiar things, returning to the dog to hug it again.*

(Session 6)

In thinking about the impact of being held up in traffic and Jason's subsequent entry into the group, we could identify a number of important themes. Jason seemed confused and muddled, evidenced by his incoherent speech and his experiences that appeared muddled, as his anxiety about his little brother would suggest. Jason was going to a Christmas party afterwards with his older brother Luke. Jason's experience on his way to the group seemed to have evoked fears and anxieties about his missing siblings and he had phantasies that they may be hurt.

Jason appeared lost; lost to himself and to the group. He seemed to have lost both his internal and external co-ordinates. The counter-transference experience was one of overwhelming disorientation; of muddle and an unclear threat. Jason raced around the room, defending against the anxiety the incident had aroused in him. The experience for both Jason and others was one of fragmentation, in that experiences felt broken up and hard to join together. This fragmentation raised questions about Avoidance/Being in Touch.

Avoidance, as indicated earlier, was the easiest component of this core category to identify as it was more visible. Jason appeared to be muddling his mind as a way of avoiding the experience of missing. The being in touch component was harder to identify. Jason was clearly overwhelmed by the emotional experience. For Jason, the experience of being in the group at this time felt rather like being in the explosion itself. The co-leaders and the other children felt the impact of the explosion through Jason's behaviour.

Exploring the counter-transference further, Jason's anxiety and distress provoked a physical holding response. (*'I put out my hand gently to stop him...'*) It seemed that this physical or external holding was necessary before a more verbal (internal) holding could occur. An attempt was made to clarify events for Jason. (Using Sorenson's (2005a) 'transition facilitating behaviours', Winnicott's (1965b) 'holding environment', Bion's (1962b) 'containment'.

It also seemed important to bring different adults together for Jason, to link with his foster carer, linking adults in mind and joining up experiences. Rustin's (1999) notion of 'Families in Mind' and Fagan's (2011) work on 'Relational Trauma' are relevant here, in that they, in different ways, vividly capture difficulties children with early experiences of trauma and disruption face in locating themselves within their family, particularly in moments of stress, given that they have at least two families in mind, their family of origin and their current foster family.

Jason's behaviour and communication in relation to the gas explosion was a good example of how a child, with experiences of early trauma and disruption, could be easily stressed and catapulted into quite frightening experiences in which the past and the present merged. As such it appears to be a clear example of a 'timehole', as described by Angela Hobday (2001).

It was hard to locate the source of Jason's anxiety. His anxiety could lie in the gas explosion itself, but it may also lie in the experience of waiting and being held up in traffic. Jason's anxiety could be located in a worry about not getting to the last group session before the impending Christmas holiday. It seemed that Jason was overwhelmed by wide-ranging feelings of anxiety that he was both in touch with and seeking to avoid. This experience is what Bion (1962b) described as emotional turbulence.

Jason started to talk about his little brother being presumably hurt in the gas explosion. Wittenberg's (2013) reference to Klein's notion of 'memory traces' is helpful here.

Jason was, in a sense, avoiding the present experience of being both in the moment and in the group. He appeared to be in touch with both a present (the gas explosion) and a past repressed experience or event of which the group was not aware. This would appear to be an experience within the group in which an experience of repressed was so vivid it challenged the notion of linear time. (Molnos, 1995, p.2)

It also raised questions about time in relation to the ability to process traumatic experiences in the context of a containing relationship in the present (Canham, 1999; Bion, 1962b). Fagan (2011) in her exploration of the three domains of psychotherapy in the context of relational trauma, would suggest that important questions arise in instances such as this about promoting the child's development; about helping Jason to process his experiences, regulate his feelings and absorb a rhythm and structure of events and a sense of time.

Examining Avoidance/Being in Touch in the context of this material would suggest that the parental task was one of finding and locating, of gathering and holding. The task for the child could be one of being found when 'lost'.

We were faced with a recurring theme for Denham that raised subsequent questions about Avoidance/Being in Touch.

*Denham and Jason collapsed in the tunnel. They were dead, they said. Nelly called the ambulance but the ambulance did not arrive. Nelly called the ambulance again. It still did not come. The co-leader and I talked about the ambulance being called and the ambulance not coming. It felt quiet and very long. Liam tried to revive the boys by tickling them and repeatedly asked "how?" Liam wanted to know what to do. Jason was collapsed and Denham was collapsed ahead*

*of him partially hidden from view. Nelly was putting on the nurse's hat and organising the doctor's kit. She had the two doctors' bags and was sorting them. The co-leader was talking to her and to me about Nelly making sure that both bags had the right/same things in them – balancing the two. When I caught sight of Nelly later she had one bag absolutely full. There had been some (painful) thoughts about her getting herself looking right as a nurse but not nursing her patients.*

(Session 8)

This extract of material illustrated a repeated theme, usually initiated by Denham, of someone being dead or in a state of lifelessness who needed reviving. The theme that followed on from this experience, and was frequently initiated by other group members, was one of actively seeking urgent assistance and that urgent assistance not coming. The source of lifelessness and deadliness was not immediately evident but the unavailable help would suggest that this was a sequence that was directly related to early experiences of neglect, unmet need and unavailable adults.

Each of the children in this sequence seemed to be in touch with this experience in different ways. Denham seemed to be in touch with being in a state of lifelessness and wanting an adult to revive him. Jason appeared to be identifying with or following Denham. Nelly seemed to be in touch, as ever, with her wish to avoid taking care and responsibility for someone else in need. Though this was dramatically different in that Nelly was dressed in the right attire, she was dressed and seemed ready to help but did not appear to know how to use the doctor's kit at her disposal. There could still be an element of avoidance in this. Liam had the same difficulty, although not in such a symbolic way, he was in touch with the task in hand (reviving the boys), he tried to use his own initiative (tickling) and sought adult help; he just wanted to know what to do and how to do it. Liam was confusing phantasy and reality.



All of the children seemed to be engaged with a common idea of something lifeless that needed reviving and were in touch with their individual perspective on this. The reality for all of the children was that in their earlier histories there was an absence of consistent and repeated good enough experiences of blissful unity with their mother that led to the internalisation of 'the good breast which forms the prototype of maternal goodness' (Klein, 1957, p. 377). The 'internalisation of the good breast is dependent upon not only innate factors in the infant but also upon the quality of mothering available to him and the interaction between them', (Reid, 1997b, p. 48).

The experience of the group for the co-leaders often seemed to be one of holding onto or holding threads together. The category Avoidance/Being in Touch in the context of the material above added a useful dimension to the thinking about this.

The category Avoidance/Being in Touch was a significant discovery; the two apparently opposing aspects needed to be emotionally managed, viewed together rather than explored individually.

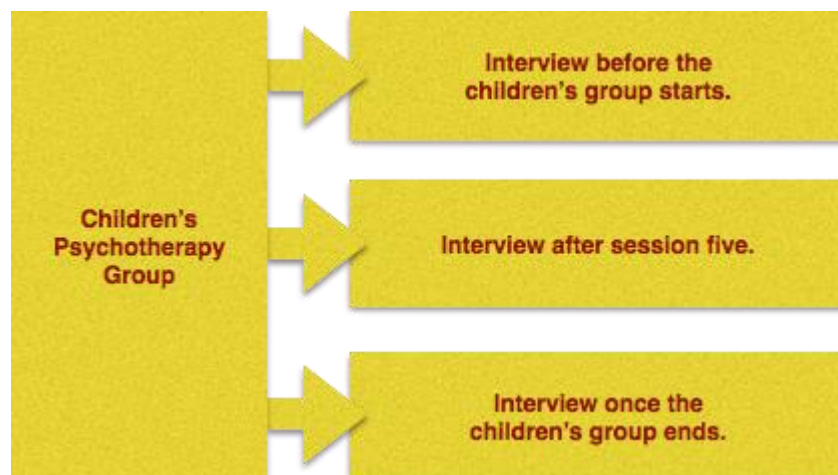
The initial presentation of the core categories is complete. The in-depth work that took place within the setting of the group was clearly evident. The intensity of this experience needs to be kept in mind whilst moving on to consider the interviews with the children's foster carers.

### **5.3 Part 2: Presentation of the Findings from the Semi-Structured Interviews with the Children's Foster Carers**

This section of the research project focuses on the narrative accounts in the interviews with the children's foster carers that took place prior to the group, during the four week gap for the Christmas holidays and immediately after the group had ended. As a way of analysing these, all the interviews were coded together and the codes that emerged were used to analyse individual interviews and linked to the individual children.

In this way, this part of the research project focussed on the children's foster carers, on their dyadic relationship with the child in their care, what might usefully be thought of as the adult component.

**Fig 5. The Semi-Structured Interview Framework for those Foster Carers who opt into the Research Project:**



## **5.4 Coding the Semi-Structured Interviews**

Coding the foster carer interviews revealed four core categories:

- 1. Identity**
- 2. History**
- 3. Development**
- 4. Separation Difficulties**

## **5.5 Analysis of the Four Core Categories**

The four core categories are highlighted below and the foster carers' interviews are then briefly explored in the sequence of these four core categories.

### **1. Identity**

Identity accounted for 105 of the 412 foster carers' codes. As the interviews were constructed in a particular way it is not surprising that so many of the codes focussed upon the children's identity. The initial questions actively sought the foster carer's view of their relationship with the child in their care, asking the foster carers for five adjectives to describe this. The interviews allowed the foster carers time to carefully consider their perceptions of their relationship with the children and develop these over subsequent interviews. The identity codes could be considered in relation to individual children over time. Individual children could be compared with other children in the group. The focus of the research project was on how the foster carers constructed and located this sense of the children's identity.

### **2. History**

Distinct from identity, one of the next prominent categories was History. In describing their sense of the foster child and their development over the

time that they had lived together, the foster carers also described their sense of the child's early history. This covered different territory for different children with different foster carers and was another means of the foster carers locating their sense of the children. It was also a way of trying to understand the foster carers' sense of the children's history and how this might influence their present experiences.

### **3. Development**

In studying the codes further, Development was the next most prominent category. This category described an aspect of the children's way of relating that was located in the identified changes the children had made since they came to live with their foster carers, contrasting their ways of relating; when they first arrived to their ways of relating now. This is a temporal category and sets the foster carers' view of the children against a general backdrop of child development and is an important area for consideration.

### **4. Separation Difficulties**

The final core category is described as Separation Difficulties. As a category, separation difficulties need careful exploration. Difficulties with separation are a normal and ordinary part of development for infants and young children. Children with experiences of early trauma and disruption however, are likely to have particular problems with separation and these separation difficulties are often linked to earlier experiences within their families of origin. The task of separating and being separate, whilst maintaining an internal or external link to a parent or carer, often takes on different dimensions for these children.

Only four of the five foster carers agreed to participate in the semi-structured interviews. The four narrative accounts are presented below:

## **Denham's Foster Carers' Semi-Structured Interviews**

Mr. and Mrs. D. completed all three interviews. The first interview took place at the same CAMHS clinic where the group took place; the subsequent two, at the family home.

Mrs. D., in her first interview, described her sense of Denham's Identity with the following adjectives: "I have said lots of times he is quite a charming, bubbly, comical boy who makes people laugh without realising it."

"There's nothing extreme about Denham in any way really. He is pretty easy going. I don't know what he'd say about himself, I really don't. He just seems to get on with things without thinking about anything too much. I think that's the thing you see, he just gets on with it."

"Denham has got a good sense of humour, he is popular with his peers, he is talented, he is pretty consistent in his behaviour but he can have some downs as well as his ups. He can be down but this comes in phases. At these times he can be very forgetful and he is going through one of these phases at the moment."

Mrs. D. thought that Denham could be passive, particularly in his relationship with his older brother, Denzil. Denham had a long history of being infantilised by Denzil. Mr. D. highlighted how Denham had sucked his thumb a lot and Mrs. D. emphasized how Denham seemed to be the neediest of the three siblings.

In the second interview, Mrs. D. said that "Denham had always behaved as the youngest. This was quite apparent in his behaviour. Sometimes he'd behave a lot younger than he should." Mrs. D. described Denham's "painful crying and whinging" and how he needed looking after when he hurt himself.

There were few descriptions of actual events in Mr. and Mrs. D's narrative accounts of their perceptions of Denham's early History. Their first Interview was filled with their concerns regarding Denzil, Denham's oldest brother's difficulties, particularly his violence and aggression and with Darren, his other older brother's gender identity issues.

Over the course of the interviews Mrs. D. seemed more able to recognise difficulties in Denham's Development. In the first interview, Mrs. D. highlighted Denham's academic ability, creativity and his laid-back qualities. She was able to describe a small number of his difficulties, but only in a limited way.

In subsequent interviews, Mrs. D. described Denham's difficulties in great detail. "Sometimes you can speak to Denham and he's not aware that you are even near him. He's in his own little world. When he gets like this, he can be particularly forgetful. It's as if he's preoccupied." In the interview Mr. and Mrs. D. asked themselves "with what? We don't really know with what, because there is nothing particularly bad going on around him at that moment." They linked this preoccupation with his whinging. "It's almost as if he's very tired but he's not," Mr. D. said. Mrs. D. added, "Denham can quickly forget things whilst going from one room to another. You can say "Go and put your shoes on Denham", and he won't do it, not because he doesn't want to do it or is refusing to do it, it's because he's forgotten to do it. Sometimes this can be quite extreme."

Mr. and Mrs. D. seemed to be exploring aspects of Denham's behaviour more fully. Mrs. D. said: "We have noticed that outside, Denham will see someone with a football, and before you know it he's playing with that football because he's just got that knack about him. Denham is submissive with his eldest brother. He is never submissive outside; it's always what we've noticed with Denham."

Later in the interview she continued, "Denham has snapped more recently, responding to Darren's teasing, Denham just snapped and kicked Darren,

knocking him to the floor. He was kicking him on the floor; this was extreme and unusual behaviour for Denham.”

At the beginning of the interviews, Mr. and Mrs. D. did not seem in touch with Denham’s difficulties. They were aware of his strengths, his sporting abilities and his popularity and success at school. Over the course of the interviews, Mr. and Mrs. D. described Denham’s upset, distressed and whingey behaviour that appeared indicative of Separation Difficulties and a repetitive, cutting off behaviour that raised questions about Denham’s emotional state and his connection to his external environment and the people around him.

### **Nelly’s Foster Carers’ Semi-Structured Interviews**

Mr. and Mrs. N. had completed three interviews; the first prior to the group, the second mid-group in the four week Christmas holiday and the third immediately after the group ended. Both Mr. and Mrs. N. attended all three interviews, choosing to undertake the interviews at the CAMHS clinic, where the group took place. Mr. and Mrs. N. had clearly given the questions considerable thought and were very engaged in the process.

Mrs. N., when asked for adjectives to describe her sense of Nelly and Nelly’s Identity and relationship with them, described Nelly as “an onion.” Mr. N. agreed with Mrs. N. that Nelly was like an onion and Mr. and Mrs. N. talked about Nelly’s layers (the skins of the onion). In one layer Nelly was fiercely independent and then in another layer she was desperately insecure. Mrs. N. added that with Mark, Nelly’s twin brother you only got the insecurity not the independence. Mr. N. described Nelly as “secretive, as if she’s got secrets but she daren’t... (and Mrs. N. completed his sentence by adding) ... let them out.” Mr. N. continued, saying “she daren’t let them out or she’s apprehensive about letting them out.”

Mr. N. described how Nelly could be both “cold and loving.” Mrs. N. agreed with this and Mr. N. said “she can give you a love and a hug when she

wants a love and a hug, but at other times..." Mrs. N. added "it's got to be on Nelly's terms."

Mrs. N. used the adjective "desperate" to describe Nelly in relation to this. "Nelly is desperate for attention, but there's a barrier and you have got to go at Nelly's pace. She's complex, it's hard to understand her really." Mr. N. highlighted how he thought that this was a question of trust. "The longer she's with you, she'll trust you more. This is going to be an ordeal for her when she's adopted, it'll take a while won't it?" he asked Mrs. N.

Initially, it proved difficult to get a sense of Nelly's History in the three interviews with Mr. and Mrs. N. Mr. and Mrs. N were very in touch with Nelly and her twin brother Mark's imminent move to an adoptive placement. However, their accounts of Nelly were taken up with Nelly's attempts to draw attention to and understand the difference between her current experiences and her previous experiences in her family of origin. Whilst there were surprisingly few accounts of concrete experiences, the focus on the difference between Nelly's previous experiences and her current experiences, largely located in Nelly's comments, as recounted by Mr. and Mrs. N., gave an idea of their sense of her previous history.

For example, Mrs. N. said Nelly "is comparing the two (sets of home experiences) and saying this (her foster home) is nicer; the way I am living now is nicer. We had friends round for dinner last night. We were getting things organised. Nelly said to Mrs. N. "you've got changed, is that what people do when they are having friends round?" Mrs. N. thought "it is coming to Nelly more that (the experience in her foster home) is the normal thing. We (Mr. and Mrs. N.) were alien when she first came; she accepts it better now and says less often that we did it this way at home." Nelly appeared to be negotiating two worlds, the first in the past in her family of origin and the second in the present in her foster family.

Another example, quoted by Mrs. N., in relation to Nelly's home experiences, was that "Nelly has always been the sensible one, looking



after Mark. She always had to, and this was something that only Nelly did. Now she doesn't have to keep an eye on him and be the mother. Mark was constantly demanding 'get me' (finger clicks), 'get me' (finger clicks) and the little mum (Nelly) would run up and get it him." Mrs. N. said that Nelly now has her own space.

These two examples would suggest that Mr. and Mrs. N.'s perceptions of Nelly's history were characterised by chaos, a lack of socialising with people outside of the family, disorganised mealtimes and coercive relationships between men and women.

Mrs. N. described a lot of violent fighting between the twins, which she linked with the experience of violence in the family of origin. Although there was not a coherent narrative of Nelly's early history prior to coming into care, Mr. and Mrs. N.'s narrative accounts appeared to be pervaded by the difficulties of Nelly's and Mark's early experiences. Mr. and Mrs. N. were repeatedly quoting Nelly as saying "It's not like that here; it's not like that now."

Mrs. N. talked about how:

*Nelly still would not let me do things for her or show her things. For example, Nelly really wanted me to show her how to knit but when I was showing her, Nelly could not stay with the experience and was saying, "Yeah, yeah," and grabbing the needles off me. Nelly was then saying, "It's gone all wrong" and I would say to her, "Well just sit and look at what I'm doing and then do it." Nelly would then say, "yeah, yeah, I've got it now" and away she would go, so you still can't tell her.*

(Second Interview)

Although there might be something ordinary and developmental about not being able to be shown, for Nelly there were added layers to this that were

linked to an experience of not being able to trust and particularly not being able to trust her principal carer, or her internal object.

Mrs. N. thought that this was “probably from the chaotic-ness at home” and an experience of “if I don’t get in quick while I’ve got the space and the time to do it then it is over and done with or someone is butting in and taking over.” Mrs. N. thought that even with that, “She’s getting a little bit better at that isn’t she? At slowing down.”

Mr. and Mrs. N. highlighted the improvements in Nelly’s Development that Nelly had made in terms of her educational progress at school. She had been on a ‘Reading Recovery Programme’. Both her Educational Support Worker and the school thought that Nelly had caught up with her reading. Mrs. N. thought that “it was still hard to get Nelly to read a book, that wasn’t a school book.”

According to Mrs. N., Nelly felt more comfortable in the foster placement and more accepting of routines. Nelly seemed to trust Mr. and Mrs. N. more, which worried Mr. and Mrs. N. in relation to her imminent move to an adoptive placement. According to Mr. N., Nelly is “very nosey. She really does have to know everything. She goes into every little detail that she sees is different.” Mrs. N. said that “Nelly takes a pride in her appearance and she likes new clothes. “Don’t I look nice?” Nelly said. Nelly also said “I haven’t got nits anymore”, and took a pride in that.” Nelly clearly appreciated her long hair now and seemed to borrow a sense of identity from Mrs. N. and her adult daughter.

Nelly is a twin and being a twin can be linked to particular identity issues in relation to being seen as separate from your twin. Mrs. N. thought that it was hard to separate Nelly from her twin brother, Mark. She said that she was able to separate them because Nelly and Mark were the fourth set of twins that she and her husband had fostered and she herself had older twin brothers. She said “I deliberately don’t lump them together as twins. We view them as individuals, because they are.”

According to Mr. N., “Since Nelly came, she has been developing. She still does a lot of mothering, but not as much as she did when she first arrived and I suppose she can be quite bossy, she can’t help but interfere.”

### **Liam’s Foster Carers’ Semi-Structured Interviews**

Mrs. L., Liam’s foster carer, said she would be unable to take part in the first interview due to health reasons but willingly took part in the second and third interviews; the first during the course of the group (in the four week Christmas holiday) and the second immediately after the group had ended. Mr. and Mrs. L. took part in the second and third interview at their family home and were happy for the information to be used in this research project.

In a mid-group interview, Liam’s foster carer, Mrs. L. used several adjectives to describe her sense of Liam’s Identity and her relationship with him. She said “he is very energetic, tends to have little outbursts of anger, he is vulnerable but can be very loving and caring.” Loving and caring are very apt words to describe Liam. Mrs. L. laughed and said, “Yes,” laughing again, “more often than not, that is how I would describe him.”

In describing Liam’s anger, Mrs. L. highlighted how, in certain situations, Liam struggled a lot. “When he does not know how to react to a situation, he finds it hard, his anger then comes out.” Mrs. L. described how “maybe, when he is going somewhere new, that he doesn’t know about, I don’t know how he feels but I think he feels scared of a new place or surroundings. He is quite friendly with people but it is the places he finds difficult.” For Mrs. L. it seemed that Liam’s anger was clearly linked to his vulnerability.

In terms of his vulnerability, Liam came across as being over-friendly with people. He was the type of person who thought he knew everybody

“because he has said hello to them.” She was worried that Liam had no sense of danger in relation to people.

Mrs. L. described Liam’s History in terms of a sequence of losses – the loss of his violent father, vulnerable mother and his two older siblings. However, the issue of loss would appear to focus particularly on his younger sister, Sarah, who was initially placed with Mr. and Mrs. L. when she was a few months old. After eleven months, Sarah moved to an adoptive placement and Mr. and Mrs. L. talked about how hard it was to help Liam with the pain of his sister being ‘gone’, “Sarah gone.”

Mr. and Mrs. L. are professional foster carers who parent very young children prior to adoption. With children coming and going, the notion of ‘going’ or ‘being gone’ was a frequent question and a constant concern for Liam.

Mrs. L. described Liam’s Development over the course of his foster placement. She said that when Liam first came to live with them, he had “a constant smile which wasn’t natural. It was like he was saying, ‘like me, don’t be horrible to me’. He had been used to the situation of people being horrible to him in his family of origin. He just wanted everyone to like him all the time.” Mrs. L. said that “this had got easier the longer he had been with us.”

Mrs. L. said, “I have noticed a big, big, difference in him, even this past year. Things are changing with him all the time. He is becoming more settled within the family. He has made a massive improvement from when we first got him.” Mrs. L. added that this was slow progress.

Mrs. L. said that “when he first came to us, Liam was quite scared of male figures. He was okay with women, like me and my sisters, but the men were just too scary. This was apparent, even though he was too friendly with people generally. He was scared of men because of the situation, what had happened at home.” As time went on, he got better and better at being

with (Mr. L.), Liam just loved adult company. “I think Liam feels safe now. He knows that (Mr. L.) is okay with him and it’s not always like it was at home.” He was more responsive to Mr. L.’s rules and boundaries.

In the interviews with Liam’s foster carers, Separation Difficulties appeared to be a pervasive issue. There was constant reference to his younger sister’s move to her adoptive placement and the movement of other very young children, coming and going in the foster placement. Mrs. L. said “I know that Liam is understanding a lot more now, because he asks about when the other children are going. Recently he had said, “Me going?” which Mrs. L. thought felt painful. Mrs. L. said “I don’t know whether, as he is getting older, he is understanding more and is able to express himself a little more.” Mrs. L. was speaking quickly which was perhaps evidence of the difficulty and the painfulness of what she was saying. She said, “I don’t know whether he is wondering ‘is it time for Liam to go now?’ and this is what has worried me.”

Mrs. L. was asked how she thought Liam saw himself and there was a long pause, “tired, burdened and difficult.” And then she said, “I don’t know really,” she paused and said, “I’m not sure, I suppose he sees himself happy, he’s a very smiley, happy boy.”

### **Eleanor’s Foster Carer’s Semi-Structured Interviews**

Mrs. E. had completed all three interviews, choosing to complete them at her family home.

In the first interview with Mrs. E., Eleanor’s foster carer was asked to ‘Use five adjectives to describe her sense of Eleanor and her relationship with Eleanor (Eleanor’s Identity). Mrs. E. used the following adjectives to describe Eleanor: cute, strong, princess, affectionate and vulnerable.

In exploring these adjectives further, Mrs. E. described how “Eleanor is cute like a doll, petite and pretty. She is funny, makes you laugh and makes

her sisters laugh. She has a good sense of humour. Eleanor knows how to get what she wants, which could sound manipulative, but it isn't."

In elaborating the adjective 'strong', Mrs. E. described how "Eleanor has gone through a lot and has faced it head on". She thought Eleanor was strong because "Eleanor has stayed at the school she went to when she was living with her Mum. Every day she passes her mum's house on the way to school. Eleanor is the one (of three sisters) that looks in..." This was an example of what Mrs. E. described as Eleanor facing things head on.

Mrs. E. had a clear idea that Eleanor "was hugged a lot and protected when she was a baby." It was this experience of being hugged and protected that gave Eleanor a quality of being special in Mrs. E.'s mind and gave rise to the adjective, 'princess'. Mrs. E. also linked being a princess to her being the youngest of the girls. Also, "because of her prematurity, Eleanor had a lot of her own way – she was the special one, a princess."

According to Mrs. E., "Eleanor is an affectionate girl. She is touchy feely and gives long kisses. Eleanor will sit with (Mrs. E.) and snuggle into her. She asks for a cuddle and feels like a daughter... Eleanor seems to be seeking approval".

Mrs. E. felt Eleanor was close in a way that could leave her vulnerable: "She wears off the shoulder clothes that are not right for her. When she first came she was keen to expose her tummy. Eleanor would go to strangers and sit on their lap." Mrs. E. has an older son who is in his mid-twenties and has two young daughters of his own. Mrs. E.'s son had talked to Mrs E. about "feeling awkward around Eleanor." Mrs. E. felt uncomfortable and struggled with this behaviour and linked it to an "overwhelming feeling of sadness and exposure."

In thinking about how Eleanor saw herself, Mrs. E. said "I think Eleanor is a little bit confused in how she sees herself. How I see this is that Eleanor is in a place where she wants to be, away from the people she wants to be

with. This is her 'home away from hell'." Mrs. E. was asked what she meant by this. She said "Eleanor is always saying that she never wants to leave here, that she wants to stay with us and when we are on our own, now and again, she calls me mummy." Eleanor says, "I really love you and never want to leave you." But she had very regular contact with her mother. "I'm not saying there's anything wrong with that. I think it's important, but then of course, when she sees her mummy, it's like she wants to be with her mummy. I think that can be quite confusing for a little girl. She wants to be with her mum, but doesn't want to go back to where her mum lives. It's a bit of a dilemma for Eleanor."

In describing Eleanor's early History, Mrs. E. did not talk about her experiences in her family of origin but concentrated on when Eleanor was a baby. Mrs. E. said: "Her early history is that she nearly died, Eleanor was a premature baby. She was only two pounds when she was born and her intestines were on the outside. Eleanor spent some time in intensive care on the special care baby unit and it was a long time before she went home from hospital."

Mrs. E.'s account was short and to the point. It conveyed, however, a picture of a very small, vulnerable baby who was exposed, not only in terms of her low birth weight and prematurity, but also in terms of her physical complications in relation to her intestines. The image that Mrs. E.'s account conveyed was stark and compared rather dramatically with her sense of Eleanor's identity, which was cute and strong. Mrs. E. saw Eleanor's vulnerability in relation to what might be described as her provocative and disinhibited behaviour that raised questions about previous sexual abuse and the risk of further abuse.

Mrs. E. described changes in Eleanor's Development over the course of her foster placement. Mrs. E. acknowledged that "Eleanor is doing really well. She's learnt to control how she reacts to a certain degree but it is still pretty obvious if you say 'you can't have that now,' that she will take offence to this. She'll stomp about, pull a face and get very moody." Mrs. E.

described sending Eleanor to her room and said “now, however, she will calm down and come down after half an hour and say sorry.”

Mrs. E. thought Eleanor’s sexualised behaviour had also lessened over the course of the foster placement.

Mrs. E. described a series of developments in Eleanor’s behaviour over the course of the group that she attributed to the input of the group itself. These included being able to separate more and doing things on her own.

In Mrs. E.’s interviews, Mrs. E. described how physically close Eleanor could be and highlighted Separation Difficulties:

*We can sit together, normally when dinner's nearly ready, you know when you have ten, fifteen or twenty minutes before it's ready and I'll come in and I'll go 'won't be long now 'Eleanor' and she'll sort of sometimes rest on me and I'll then have to separate from that. That's the only time we really do cuddle or when she has hurt herself or she's feeling a bit sleepy and that's when I feel the need to get up, and say "I need to get up now and see to dinner." I don't kind of think of it as a separation because she's so comfy. It needs working on doesn't it?*

(Third Interview)

In the extract above we could see a difficulty with coming together and separating that somehow seemed shared and Mrs. E. appeared to be trying to structure this experience for both herself and Eleanor.

Mrs. E. thought that over the course of the group, Eleanor was able to separate more, evidenced by her being able to take herself off to another room and do her homework on her own. Eleanor had previously not been able to separate in this way. Mrs. E. thought that this was an extraordinary thing for Eleanor, aged 6, to be doing. Mrs. E. also described some difficult, aggressive and challenging behaviour that Eleanor was presenting at



school, which, in the light of her separation difficulties, seemed a development. In the second interview, Mrs. E. described how Eleanor had misbehaved at school for the first time since she had joined the group. Her teacher had said that there had been a massive change in Eleanor and her behaviour was very different. Over the course of the group Eleanor's teacher was able to see this as a more positive change.

## **Jason**

As discussed earlier, Jason's foster carer did not want to participate in the interviews.

During the interviews it was apparent that all of the foster carers at some time thought the children had made developments over the course of the group. Several of them described positive changes that they linked directly to their participation in the group. The aim of this research project, however, was not to examine the usefulness or effectiveness of a children's psychotherapy group for this particular client group per se. A further research project could usefully address this question.

## **5.6 Comparing and Contrasting the Child Psychotherapist's Experience in the Children's Psychotherapy Group with the Foster Carers' Experience as Reported in their Semi-Structured Interviews**

This chapter presents the findings of this research project, in that it explores the child psychotherapist's experience of individual children in the group and compares this with the foster carers' experience of the same children as reported in their interviews. The two are brought together in this chapter and placed side by side. Comparisons are then made.

Child psychotherapists have an understanding of the concept of an internal world and an external world and how the two interact. They also have an understanding of unconscious processes. In the group there is a constant

interplay between the children's internal and external worlds and different unconscious processes.

Esther Bick (1963) highlighted how infant observation helped child psychotherapists to vividly conceive the infantile experience of their child patients. 'For example, in commencing the treatment of a two and a half year old child, the child psychotherapist would get the sense of the baby that he was and from which he was not so far removed' (Bick, 1963, p. 558). Working with children in a group makes these infantile experiences particularly visible and sets them in the sharp relief of different and multiple relationships.

Child psychotherapy training, with its emphasis on analysis, infant observation and supervision brings a specialist perspective that is useful in the context of the group. It is also useful in the context of the interviews with the children's foster carers. The foster carers have extensive first-hand experience of children in their care and bring to the task of parenting them, their own experiences of being parented, and perhaps of parenting their own and other children. They bring to the interviews detailed accounts of the children's relationships, both inside and outside the family home. The foster carers also bring themselves and the complexity of their internal worlds to their interviews.

Core categories identified in the group were explored in the context of the interviews and vice versa. This resulted in an increased awareness of the child, their strengths, dilemmas and difficulties. It became possible to see not only the children's blatantly obvious difficulties, but also their less apparent difficulties. It also became possible to see complex hidden difficulties. The two differing perspectives offered partial pictures of the children and this chapter brings these together and attempts to integrate these.

When comparing the children's group and the interviews with the children's foster carers, different patterns became visible. One pattern was of

presence and absence. For example, there were aspects of each child that were visible in the group but were not present in their foster carer(s') interviews. Similarly, there were aspects of individual children that were highlighted by their foster carer(s) in their interviews that were not visible in the group. There were, however, aspects of individual children that were visible both in the group and in the interviews. With this presence and absence in mind, re-visiting the clinical and interview material gave a more consolidated picture of the individual child and his or her experience.

This section attempts to integrate the child psychotherapist's experience of the group and the analysis of the interviews.

In the group, the children's relationships with each other and the co-leaders helped to identify the children's characters, re-visit some of their early experiences and examine their perceptions of other children within the group. The group provided an arena where the children could explore their observations of themselves and each other (Reid, 1999). The group experience helped to clarify, define and develop ideas about individual children that would not be possible without the group context.

#### **5.6.1 Denham**

Denham, prior to joining the group, of all of the children presented as the child with the least difficulty. His primary school in particular saw Denham as a well-functioning, academically able boy with good social skills who was physically talented, for example, in football. His class teacher did not see the need for him to attend the group. Denham's foster carers held a similar position to his class teacher. Whilst identifying his strengths and skills they also identified him as the neediest of the three siblings demonstrating that they were, in some way, in touch with his difficulties. In the group Denham seemed to contradict these well-functioning perceptions. He was, at times, quite isolated in the group and very preoccupied with aspects of his play.

At first glance there seemed to be a surprising incongruence between what was seen in the group and what was reported by Denham's foster carers. Rather than this being evidence of competing or contradictory accounts, it was seen as evidence of the nature of Denham's complex difficulties, which were at the same time both present and hidden.

This could be linked to the notion of the 'false self' (Winnicott, 1965c). It is useful to think about Denham in this context, as presenting a 'false self' that is compliant to his object as Denham appears to have major gaps in his development that leave important aspects of him unintegrated.

### **Denham in Transition to the Group Room**

In the group, Denham could be described as having a background presence. His presence seemed more apparent in the transition from the waiting room to the group room. Details of the transition are included here in an attempt to bridge the gap between the differing perceptions of Denham inside and outside of the group; the transition itself being seen as a bridge between the differing perceptions of the school, foster carers and the co-leaders. Whilst this might be true of all of the children in the group, the particular detail of Denham's transition is included here to facilitate greater understanding of Denham and his difficulties.

In the waiting room, Denham would frequently be purposefully engaged in creative activity that involved adults (foster carers, child psychotherapist or co-leader) having to wait for him whilst he finished a piece of art-work he wanted to take to the group room. This behaviour could be seen in the context of role reversal, in that by keeping the adults waiting and in a state of limbo themselves; Denham was controlling and managing his own difficulty in this area.

For Denham however, his creative work seemed to be about creating an object (in a non-analytic sense, an item) that could help him negotiate the transition to the group room. This was an object that helped him with

negotiating transition rather than a transitional object which is object related and inevitably involves a relational link to a key parent/carer (Winnicott, 1960).

A child's desire to take objects from the waiting room to the psychotherapy room and vice versa is familiar territory for child psychotherapists. Child psychotherapists would normally seek to set boundaries and limits at these times; encouraging the child's parents/foster carers to help the child to leave these objects in the waiting room. This practice is fundamental to the process of establishing the psychoanalytic frame in which difficulties can be identified and contained. However, in these instances with Denham, the psychoanalytic frame was not drawn upon. No attempts were made to insist that Denham's art-work stayed with his foster carer. The researcher was in touch with Denham's difficulty but not consciously aware of this.

The reluctance to intervene appeared to be linked to both the experience of Denham in the group and the counter-transference experience at these times. In thinking about why this course of action was taken, it became clear that Denham had a real difficulty with holding himself together, a difficulty of which Denham's foster carers were also perhaps unconsciously aware. Denham's acute need at these times was not consistent with the foster carers' view of him as presenting little difficulty.

Not confronting this challenge to the structure of the group led to a significant problem, but it also allowed the exploration of deeper layers of Denham's personality. Observing the sequence in relation to the objects that helped Denham in his transition to the group room, it became clear, over the course of the group sessions that both the objects and Denham himself seemed to get lost very quickly once he entered the group room.

Winnicott (1960) compared his concept of the 'transitional object' with Klein's (1946) concept of the 'internal object,' emphasizing how a lively internal object (the breast, a mother figure, general environmental care) needed to be in place for a child to be able to use a transitional object. To

use a transitional object, the item/the possession needed to be linked with the lively internal object it represented or stood in the place of.

These distinctive themes came together in thinking about Denham and appeared to be linked to the lack of liveliness in his internal objects and his clinging to an item in transition from the waiting room to the group room. This item quickly lost its liveliness and apparently became meaningless too.

Denham's difficulties in this area became more and more visible. The counter-transference experience in relation to the difficulties in the waiting room, suggested that there was a link to experiences of fear and helplessness, and a failure in his objects in relation to protecting him. It was important to understand this experience in relation to Denham. Denham did not have the internal resources that linked him to predictably reliable, trustworthy internal figures. Given his early history and family background this was not surprising. Denham did not have the ability to use a transitional object.

### **Denham in the Group**

In the waiting room, Denham's creativity (his origami, his reference to playing guitar) seemed to be a central part of his sense of self and identity. Yet in the group, his creativity did not appear to be overtly received and recognised by either the children or co-leaders. Though his creativity was acknowledged it did not seem to generate a lively link to the group. Children in the group were interested in Denham but not specifically in his art and craft skills.

Nevertheless, Denham was a significant group member. Jason, for example, was very interested in Denham's skin. Denham had dry, scaly skin on his legs that Jason thought was rather tiger like (the pattern of cracks on the surface). Jason's interest in Denham's skin was persistent and seemed for him to be an important link and means of connecting with

Denham. The meaning of this link was unclear. The link between Jason and Denham could be the shared colour of their skin, or perhaps Denham's dry skin evoked a sense of damage with which Jason identified. The child psychotherapist was left guessing at the meaning of this link but not its significance. One might wonder why a link with Denham's skin was livelier for Jason than a link with Denham's mind, and how inaccessible Denham's mind might be at these times for Jason.

Eleanor was interested in Denham and joined in with his play. Eleanor and Denham appeared to have an unconscious connection, one that was not verbally would often be absorbed in ordering and sorting out the house from the inside and Denham would be actively engaged in sorting out the house from the outside, decorating the outside and attending to the entrance. At times, Denham and Eleanor would change positions so that Denham was inside the house and Eleanor outside. There seemed to be something important and connected about their play, as if they were exploring the relationship of a couple that could actively be engaged with each other, but not physically connected. They appeared to be holding on to the presence of each other and again there was not an obvious link between their minds.

At times Denham seemed to engage in a detached way. For example, when he erected the tunnel vertically and stood up inside it. When in the tunnel, Denham said repeatedly "gummy mummy". Both co-leaders frequently engaged in trying to make sense of this play. It was unclear whether Denham was referring to a mummy, a mother figure or an Egyptian mummy, a more disturbing frightening presentation. The more frightening interpretation of his words came to mind because of Denham's particular interest in something very deadly. One might wonder about the landscape of Denham's internal world and the nature of his internal objects. An idea came to mind at these times of a claustrophobic anxiety, of Denham being trapped inside his failing, dead object.

Denham had early difficult experiences linked to his mother that appeared to have had a terrifying quality. Denham's early frightening experiences perhaps connected with Eleanor's early frightening experience of being a premature baby in an incubator, which seemed to come to life in the group; their early experiences could have connected them and led them to play together. There was a history of extreme domestic violence in both Denham's and Eleanor's early family histories. Their domestic play could have been a means of them trying to control and bring order to their play whilst keeping their environment safe.

The material in the group raised questions about Denham's persistent interest in death and something deadly. Sorenson's (2005a) comments about the kinds of anxieties that can arise in gaps and the link with this in the drawing illustrated below was brought to mind. It was suggested that the anxieties Denham was exploring in his play came into his mind in an overwhelming way at times of separation. In thinking about the work of Fraiberg, Adelson and Shapiro (1975), Williams (1997) and Susan Reid (2007) on the experience of being massively projected into, Denham's early experiences came to life. The experience of him in the group would suggest that his early experiences involved not only being faced with the eyes of a dead, disconnected object but experiences that made Denham's fear of being trapped inside an overwhelmingly frightening and disturbing object understandable. This was something akin to nameless dread (Bion, 1962b).

The following picture seems to illustrate the idea of being massively projected into and the nature of the anxieties that arise from this.





**Figure 6: What Arises out of the Gap? Picture taken from the Cover of ‘Psychotherapy with Severely Deprived Children’, Boston and Szur, 1990<sup>27</sup>.**

The only time that Denham’s creative capacity appeared to enthuse the other children was when he covertly constructed a gun (Session 4, p. 135). The other children were very interested in both the covert nature of this activity and the gun itself. A gun has an obvious link to something deadly, dangerous and powerful which held significance for all the children.

Something inaccessible and deadly appeared to have a continuous presence in the group in relation to Denham. Denham regularly invited the other children to play at being dead so that he could be the doctor and revive them. In these instances he appeared to be playing at enlivening his dead objects. He could also put himself in dangerous situations; for example, putting a chain (necklace) around his neck and needing the other

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<sup>27</sup> I am grateful to Pamela Berse Sorenson for highlighting this drawing.

children (or co-leaders) to protect him, perhaps putting the children in touch with his experience of trying to revive a dead, frightening object or an object in danger.

### **Denham's foster carers**

Denham's position in the group was remarkably complex. His foster carers' narrative accounts seemed to match this complexity. In their interviews there was an increasing awareness of Denham's difficulties. We saw difficulties with transition emerging and in the interviews we increasingly saw the severity and hidden nature of his difficulties. There seemed to be a contradiction in the pattern of Denham's difficulties in that his strengths appeared to mask and deny what could be described as real, significant but hidden disabilities.

In the first interview, Mr. and Mrs. D. began an account of Denham that focussed on his strengths and his easy going, 'laid-back' nature. As Mr. and Mrs. D. explored this laid-back nature over the course of this first interview, and in much more detail in subsequent interviews, it seemed that they were exploring different aspects of his laid-back nature for the first time and that this caused them some concern.

For example, Denham's foster carers described asking him to put his shoes on; he could go through a door and simply forget the instruction. Denham's foster carers seemed to be discovering that one aspect of his laid-back nature was that thoughts appeared to drop out of his mind. This seemed linked to the idea of Denham's dead internal objects not being able to hold things in mind.

Mrs. D.'s description of Denham being laid-back became an account of his disconnection, his anxiety and his forgetting. She highlighted how sometimes Denham could be quite whingey. When he was like this, Mrs. D. thought that Denham came across as being very immature for his age. She described how Denham sucked his thumb which she clearly saw as a

source of comfort to him. Denham often had both his thumbs in his mouth. He could also put his hands down his trousers in an effort to comfort himself. Denham became quite vacant at these times, and he seemed to be daydreaming. This occurred often.

In exploring Denham's laid-back nature, Mr. and Mrs. D. also seemed to become more in touch with the reality of Denham's relationship with his older brother Denzil. Mr. and Mrs. D. provided ample and painful evidence of this. They described how Denzil repeatedly cuddled and cradled his younger brother but also hurt him in a way that was visible afterwards but difficult to detect at the time. There was something hard to see about this hurting. These different aspects, the closeness and the hurting, could be increasingly thought about by Mr. and Mrs. D.

There seemed to be parallel processes of thinking evident in the minds of the child psychotherapist and the foster carers. The foster carers' perspective of Denham's difficulties matched the child psychotherapist's concern regarding Denham's problems in the group and when negotiating transitions. It was interesting that Denham's foster carers commented independently on Denham's difficulty (of going through doors and forgetting what he was going to get) at the same time as the child psychotherapist was exploring research into loss of memory and disconnection that could be associated with passing through doors.

Mr. and Mrs. D.'s descriptions of their increasing awareness of Denham's separation difficulties appeared to mirror the experience of Denham in the group, in that his detachment and difficulties became more obvious over the course of the group sessions.

Denham's foster carers seemed to be increasingly in touch with his concentration and memory difficulties and were more able to think about his passivity in relation to his eldest brother's aggression. There was a question of whether Denham's passivity and his preoccupation with deadliness were linked.

Mr. and Mrs. D. were connected with different facets of Denham. For example, his submissive relationship to his older brother did not occur outside of the family. They were aware of how Denham was able to acquire what he needed from others, seemingly without negotiation (the football referred to earlier).

On studying all three interviews however, there was an absence in the foster carers' interviews of anything linked with the domestic violence that occurred in Denham's family of origin. There was a tendency for Denham's internal objects to be in a state of disconnection, and Denham could be identified with this tendency. Both he and his foster carers appeared unable to keep things in mind.

Perhaps, in a similar way to the previously unseen and unnoticed aggression of Denham's older brother, the violence and aggression of Denham's parents could not be thought about without support. The foster carers might have been in touch with the unconscious fear of all three brothers regarding their family of origin.

The only time the family history was mentioned was when Mrs. D. referred to a remark made by Denham about his baby brother being conceived after his father went to prison. Denham said: "My mum will cop it when dad gets out (of prison)." This brief reference put one in touch with the very frightening presence of father and his impact on Denham and his foster carers. His father had a fearful presence that was hard for Denham to think about and could only be thought about in an inappropriate and adultified way. Denham seemed to be repeating something he had heard and to be using this remark in a pseudo adult way; in a way that denied his age and understanding.

Denham's family of origin was very present at times in the group. Denham introduced himself in the first session as having 36 family members, perhaps referring to his extended family? In the group room, in a

conversation with Eleanor, Denham said that he did not have a dad (Session 7, p. 132). Superficially, Denham's family history did not appear to be present in his foster family's mind as it was rarely referred to. There might be questions about this. Was it too difficult for Denham to talk about his family of origin with his foster family or was it too difficult for his foster family to think about, or both?

### **Comparing and Contrasting the Two Experiences**

In comparing and contrasting the experience of Denham in the group with the narrative accounts obtained from the interviews, the dominant theme that emerged was Denham's difficulty negotiating change and transition. When exploring the data in greater depth it was found that although there was an initial emphasis on his strengths and creativity, Denham's marked difficulties, which could be linked to being separate, became increasingly apparent and his problems in negotiating change and transition could be set in this context.

The shape and nature of Denham's obvious difficulties were clearly linked to problems in concentrating and remembering. Mr. and Mrs. D. provided much evidence of this. Whether these difficulties linked to the need to suppress or not think about his history or whether they were linked more generally to the devastating impact of early trauma is unclear.

Themes of sense of self and identity and development were less apparent. These two themes would appear to be initially absent from the experience of Denham in the group and his foster carers' narrative accounts in the interviews. Some themes were more actively present whilst other themes were strikingly absent. Given that Denham was identified as a gifted, creative and talented 7 year old by both his foster carers and teachers at school it was striking to note that in the material from both the group and foster carers' interviews there was a lack of a sense of self and identity. This could be linked to Denham's separation difficulties and 'false self' presentation (Winnicott, 1966b).

## **How these Comparisons can Influence Further Work with Denham, his Future Carers and the Professional Network**

By comparing and contrasting the child psychotherapist's experience of Denham in the group with the narratives from the interviews with Denham's foster carers, experiences became shared. It was then possible to carefully consider the nature of Denham's strengths and difficulties and reflect on what support any new foster carers and their supporting networks were likely to need.

There were areas of development for Denham that we did not need to worry about. At school, for instance, on the surface, Denham was a well-integrated, well-functioning, age-appropriate boy. He was succeeding socially and academically and was physically able in relation to sports activities. In contrast to this, there were areas of Denham's development that we needed to be very anxious about. In these areas Denham was not progressing as well and there were significant deficits. These deficits were easily identifiable in the group and by Mr. and Mrs. D. in their interviews. Both Denham's foster carers and the child psychotherapist had picked up the same areas of difficulty even though Mr. and Mrs. D. might be describing these differently.

How the deadliness of Denham's internal world and the unreliability of his objects were impacting on his thinking, his capacity to manage change and the course of his development generally, needed to be highlighted and conveyed to school and any potential new carers. The particular problems faced in recognising this in both Denham and his future carers would need to be addressed.

These are the areas we would seek to support Denham with in terms of helping him to manage transition and supporting him with his future development. Crucial areas of deficit, that Denham will need help with, were in relation to his tendency to disconnect and strikingly hidden difficulties in relation to close, intimate relationships and social

communication. Denham is likely to need considerable support in developing a sense of self and identity.

It will be important in this to acknowledge the gap between these difficulties and deficits and Denham's external presentation. Very specific work will need to be undertaken to hold on to this gap. Setting up a model of communication that embodies what Kenrick and Tollemache (2006) call the 'matrix of care' and McLoughlin (2010) terms 'concentric circles of containment' would be helpful to both identify and hold on to these difficulties. Denham's school will need to appreciate that whilst he was functioning well in school, there were still ways in which his early traumatic experiences impacted on his development. There might be aspects of personal and social development at school that could be harnessed to help and support him. It would be useful to consider how the gaps in his social and communication skills might be usefully identified and how he might be best supported with these. Considerable work will need to be undertaken to address this.

Further work with Denham is indicated, whether in the context of sibling group work with his two older brothers or at a later date, family therapy with his future foster family. Individual work with Denham might be needed at a later date.

### **5.6.2 Nelly**

Prior to the group, Nelly was perhaps the child that presented the most anxiety. She is a twin and the professional concern appeared to be entirely focussed on her twin brother Mark. Within the professional network there was a concern that Mark's complex difficulties were making it impossible for Nelly's needs to be recognised and met. An idea was emerging that Nelly's emotional, social and cognitive development was being severely impeded by Mark's demands and that Nelly's development would be better promoted if she and Mark were separated.

Nelly's inclusion in the group was a direct response to this and a means of giving Nelly a separate space in which her needs could be identified and assessed and consideration given to how these needs might be addressed. The impact of Mark not being included in the group clearly demonstrated aspects of the twins' relationship and Nelly's difficulties which were not apparent outside of the group but were acutely visible within the group<sup>28</sup>.

The experience of Nelly in the group without her twin suggested that separating the twins per se in any future placement, rather than assisting Nelly's development, would be highly detrimental. Nelly needed the support of her twin brother Mark.

### **Nelly in Transition to the Group Room**

Nelly's foster carers worked actively to support Nelly in the transition from the waiting room to the group room. Mr. and Mrs. N. had clearly spent time preparing Nelly for the transition ("these are the pictures I told you about" said Mrs. N., referring to the group pictures as we walked along the corridor). Nelly demonstrated a keenness to get to the group room; she would often run ahead but would always wait at the door. As we walked along the corridor Mrs. N. often talked about Mark, his difficulties and his distress at not coming to the group. Mrs. N. said Mark wanted to come to the group, "he can't" Nelly said loudly and emphatically.

### **Nelly in the Group**

The experience of Nelly in the transition to the group room added to the experience of Nelly in the group. There had been significant evidence of her struggling to present herself and join the group; of Nelly avoiding the task of meeting the group and being recognised and accepted.

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<sup>28</sup> Whilst Nelly was in the group Mark was receiving input from CAMHS-LAC and in his own right was receiving additional support from an educational support worker whose work the child psychotherapist supported.



Nelly's presentation in the group took many different forms. For example, in early sessions Nelly presented herself in identification with a neglectful adult parent. In her play with the dressing-up box, Nelly repeatedly asked where the "not broken one" was (Session 1, p. 141). In this play she seemed to be identifying with a neglectful female parent who kept all the good things for herself rather than providing her child with what she might need. This neglectful female was in direct competition with Nelly for scarce resources. This left Nelly with a difficulty, in that she had no positive internal, female, maternal figure with which she could identify and make contact. This presentation would limit Nelly's capacity to develop her own female identity. It also left Nelly with other difficulties.

In the group, Nelly's presentation was one of being totally uninterested or unwilling to think about the idea of being taken care of or of her taking care of others. This was a way of not only refuting her neediness and vulnerability; it was also a way of avoiding the experience of linking with an internal and external maternal and paternal object.

The experience of identifying with these internal and external parental figures in taking care of and parenting others, was not an experience Nelly seemed to want to engage in. The nature of her response to this would suggest that any experience of parenting, of being parented and being taken care of, would inevitably lead to neglect, disappointment, exposure and an inescapable experience of being abandoned and let down.

Had she allowed herself to be in the position of being looked after, Nelly would have risked the possibility of being suddenly and overwhelmingly put in touch with unbearable feelings, particularly of missing and loss. This seemed to be a central or core aspect of Nelly's sense of self that could be linked to her history of deprivation and of having to 'parent' both her twin brother Mark and younger brother Adam.

In the group we were able to see, perhaps significantly in her relationship with Jason, the impact of Nelly's early history of neglect and deprivation.

Growing up in a patriarchal family of origin where males were dominant and valued more highly added an extra layer of competition in the fight to have one's needs met, particularly with male rivals.

Nelly's early experience would suggest that not enough predictable and reliable resources were around to meet the needs of one, let alone two or three babies. Infantile needs in this context could not be reliably met. In Nelly's mind, perhaps Jason became the other demanding twin or yet another demanding baby.

A number of Nelly's presentations in the group made sense in this context. Nelly frequently presented herself in opposition, for example, when she sat in the co-leader's chair with her arms folded, looking smug. This presentation had a number of aspects, Nelly clearly sought to be in control; a common experience with children with similar histories. Nelly also sought to occupy the space of another and this had obvious links to the previous discussion in that Nelly attempted to directly occupy the female adult/the co-leader's chair.

In the group, Nelly, rather than presenting herself to another who had the power to accept or reject, frequently presented herself to an absence, presenting herself to "thin air" (Session material, p. 130). There were few examples of Nelly making attempts to present herself directly.

In relation to this, there was evidence of Nelly identifying with the aggressor (Freud, A., 1992). This was also apparent when Nelly, in response to being evicted from her tent by the boys, evicted Eleanor from her tent. Nelly had no space to think about Eleanor's loss and vulnerability. All of the vulnerability was located in Eleanor and, on the surface; Nelly's own vulnerability was not exposed.

By consistently observing Nelly in the group, it became obvious that Nelly could not find a space for her own vulnerability and as a result the search for a space of her own, in which she could develop her sense of self in

relation to others, was extremely limited. For Nelly, the experience of feeling vulnerable in the face of threat was quickly “split off” and projected into another (for example, see session materials, Jason (p. 129) and Eleanor (see p. 148). In this way, the experience of being vulnerable and being under threat was avoided by identifying with and becoming the aggressor (Freud, A., 1992).

In the group sessions, there seemed to be an awareness of vague overwhelming needs that could not be met, evidenced by Nelly’s repeated unwillingness to meet these needs. In addition, Jason sometimes became a receptacle for Nelly’s anxieties about fear and shame in relation to presentation. He also became an object of ridicule, in which he appeared to be punished for being male.

Whilst at times Nelly was able to let go of her deep-seated resistance to acts of looking after and take care of Liam, the thinking of the co-leaders was that Nelly was very emotionally defended and these defences were hard to penetrate. Holding on to these defences would have consequences for her emotional and social development and impact on the development of her personality and sense of identity. Identifying with the aggressor could be used as a substitute for having a safe identity of her own (Freud, A., 1992).

In later sessions in the group, Nelly seemed to be finding an ‘identity in opposition’. This appeared to be a new phenomenon in that it was hard to locate in psychoanalytic literature. Identity in opposition links to what Fagan (2011) describes as the domain of developmental support in child psychotherapy. It represents the possibility of a move away from more defensive and two dimensional ways of relating (Bick, 1968; Meltzer, 1975). In this instance, the embryonic search for a sense of self and identity occurred in the safety of opposition. This identity in opposition was visible in Nelly’s repeated attempts to get her name placed over the picture of the blonde girl on the calendar. Her demands in this area would fit with the

patterns of presentation we saw above, her need to be in control, her belief in the unreliability of adults and her need to take care of herself.

The counter-transference, in relation to this was that there was a distinct liveliness in relation to the blonde girl which suggested that in the safe context of opposition Nelly could tentatively begin to claim a sense of her own identity and that this was a significant development (see below).

One aspect of her preoccupation with the blonde girl could be seen as an attempt by Nelly to fight to establish her female identity. However, it seemed unclear what this female identity represented for Nelly.

There was much evidence to suggest that this was not linked to a caring maternal figure or, indeed, an attractive, sexual female identity. The counter-transference experience of Nelly in the group would suggest that this seemed linked to Nelly's wish to have a female identity, distinct and separate from her male twin; to be a little girl with long blonde hair. However, all we can safely say is that, for Nelly, a female identity was likely to be an extremely complex arena. It seemed, however fleetingly, that Nelly could have an identity that was more in touch with her sense of self; she was in reality a little white girl with long blonde hair. In this regard she was less vulnerable and had less need to be linked with a male aggressor.

Nelly's presentation in the group revealed the depth of her difficulties and the problems she had in locating herself in dyadic relationships.

### **Nelly with her Foster Carers**

In their first Interview, Nelly's foster carers, Mr. and Mrs. N., had clearly picked up on Nelly's defensiveness. They immediately started the interview by describing Nelly as "an onion" (referring to her layers) and "secretive" and having secrets she doesn't let out. Mrs. N. used the adjective "desperate" to describe Nelly in relation to this. "Nelly is desperate for

attention, but there's a barrier and you have got to go at Nelly's pace. She's complex, it's hard to understand her really."

In her foster home, Nelly appeared to be curious about a sense of female identity that focussed on the space, time and importance given to the maternal female role; for example, laying the table, changing for dinner, and the finer details of domestic living in her foster home. Nelly seemed to be exploring a sense of female identity linked with domestic function. This would suggest that this was an area that was seriously lacking in her early development.

The foster carer appeared to be connecting Nelly's exploration of her role and female identity as a way of Nelly setting her experiences in the present against her early experiences in her family of origin. By identifying with the foster carer's maternal housekeeping tasks, she clearly felt that Nelly was comparing her experiences with her foster carer and, at the same time, processing more traumatic experiences of her former family life. Her foster carer was clearly detecting something important in Nelly's exploration of her role but she seemed unable to develop this experience more with Nelly.

Nelly's foster carers saw this as a means of Nelly working through her traumatic early history. This was referred to but there was little in the interviews to suggest how her foster carers had come to this conclusion. The experience of Nelly in the group would suggest that she had deep seated difficulties in relating to a female maternal figure. Nelly appeared to be examining aspects of her foster carer's domestic life as a way of safely exploring a female identity from a distance. However, this lacked an emotional engagement with three dimensional aspects of maternal functioning. This would suggest that Nelly's exploration in this area could be linked to an adhesive identification (Meltzer, 1975). It might also be linked to Nelly's awareness of an imminent move and an attempt to stay with her foster carer.

## **Comparing and Contrasting the Two Experiences**

In comparing and contrasting the child psychotherapist's experience of Nelly in the group with the narrative accounts obtained from the foster carers' interviews, a theme of struggling to establish a sense of identity appeared to dominate. Nelly's wish to be connected to the blonde girl and her desire to understand the domestic functioning of her foster carer could be seen as a sign of hope and development. Nelly was beginning to explore her sense of self and identity both within the group and with her foster carers. This could be seen as the beginnings of her being in touch with her female identity and a move away from her identity with the male aggressor. This area was extremely problematic for Nelly.

Looking at the experience of Nelly in the group, a number of themes would appear to be absent. For example, there seemed to be little evidence of separation difficulties and difficulties in negotiating transition. In addition, in the interviews, there was an absence of historical links. It could be argued that Nelly's significant difficulty with presentation and joining and the rather skilled way she both avoided and masked this would make any separation difficulties hard to detect. Many of Nelly's ways of relating had an adhesive quality, what Meltzer (1975) described as adhesive identification. In thinking about this distinction in relation to Nelly and the size of the task of supporting her in the transition to her future adoptive placement, the idea of an identity in opposition could provide the embryonic roots of a sense of identity and a source of internal support. Wall's (2012) assertion on how every day matters is relevant here.

## **How these Comparisons can Influence Further Work with Nelly, her Future Carers and the Professional Network**

By comparing and contrasting the child psychotherapist's experience of Nelly in the group with the narratives in the interviews with Nelly's foster carers, experiences were shared. It then became possible to carefully consider the nature of Nelly's strengths and difficulties and reflect on what

support the new foster carers and the supporting networks were likely to need.

The absence of a strong, reliable maternal figure was clearly evident in Nelly's internal world and was an important developmental arena that she will need to be supported with in order to secure her long-term future. The establishment of a separate space, a space to be in which Nelly could explore her identity, would need to be recognised in her adoptive or long-term foster placement. The complexity of her internal world and her capacity to massively project into others would need to be understood. It will be important to see Nelly in the context of dyadic relationships rather than merely being on the receiving end of the aggression of others. In adhesive identification relationships are two dimensional rather than three and there is no space for separation. It will be important to view Nelly's relationships in a three dimensional context.

Nelly's future carers and her school will need considerable help in understanding her. Nelly will need to be given time with a maternal figure (as well as a paternal figure) and be given space to help her develop relationships in a non-threatening way. Nelly's own aggressiveness had been overlooked as a result of her brother's aggressiveness and the violence and hostility in her family of origin; her role in provoking others will need to be acknowledged. The nature of her internal world and internal objects will need to be conveyed to gain further understanding of her defensive mechanisms.

In psychoanalytic literature, a direct link is made between the infant's relationship with his/her mother or carer and the capacity to develop peer relationships and key relationships in later adult life (Bowlby, 1980; Kenrick and Tollemache, 2006). The absence of a reliable maternal figure in Nelly's early history is likely to significantly impede Nelly's development. It will be important to seek school support to help Nelly develop her peer relationships and identify areas of difficulty which could be covered by the school's provision of Personal and Social Education.

Mr. and Mrs. N., in the interviews, had already started to identify difficulties which Nelly would be likely to have in the transition to her future adoptive/foster placement. Although Nelly's difficulties with transition were not so obvious within the group, her difficulty in presentation, in presenting herself and joining others would suggest that Nelly is likely to have significant difficulties in this arena. The move to a future placement would distress her and any separation difficulties might become more obvious at this time and lead to more difficult behaviours. Both Nelly and her future adopters/foster carers are likely to need support in helping Nelly with negotiating transition and change. Nelly may need individual psychotherapy at a later date.

It is important in thinking about Nelly's sense of identity to recognise that there are key areas of development. Her interest in her foster carer's presentation and her identification with the blonde girl on the calendar would suggest that we have the early shoots of her developing an identity. Identifying areas in which Nelly will need to be protected and understood, in order to promote her development, will be an important area in which Nelly will need support. Failing to recognise that Nelly is not always in complete opposition is vital as she is likely to need very gentle, consistent and long-term input.

### **5.6.3        Liam**

#### **Preparatory work for Liam Prior to Joining the Group**

When the group first started, Liam was seen as one of the most vulnerable children in the group because of his learning and physical difficulties. There was some concern that these difficulties might lead to Liam being scapegoated by the other children within the group. Indeed, the co-leaders were anxious that Liam might not be able to manage the highly charged arena of the group.



It was evident that Liam had acute separation difficulties which were also very evident in the clinical setting. During the initial observation of Liam at school it was apparent that Liam had significant language difficulties, his speech was considerably delayed and his words were indistinct. Liam could be easily frustrated and was emotionally volatile and at these times tended to hit, spit and shout out.

As a result of his initial presentation, four separate observations were undertaken of Liam in school by both co-leaders (two observations each) and two meetings took place with his class teacher. Attention was focussed on his language difficulties and what was working in managing his separation difficulties and his difficulties with transition both at school and with his foster carers. According to his class teacher, pictures seemed to help facilitate his understanding and manage his speech difficulties.

Pictures of children were placed on the walls along the corridor and inside the group room. These pictures were also placed on the calendar. Pictures were used to illustrate the coming together of the group, the circle at the beginning of each group session, the opening of the group box as a move to play and the closing of the group box to indicate the closing circle at the end of the session. Attention was drawn to these pictures by the co-leaders at appropriate times. These pictures seemed to also help the other children in the group.

In the group, we provided two mobile phones, in addition to the other telephones, in the hope that this would help Liam manage his anxiety. In the additional observations at school, we had noticed Liam's physicality, his need to constantly ride on his bike and his aggressiveness; he would frequently hit out and spit. With this behaviour in mind, in addition to the usual tissues in the group room, we provided facial wipes and wipes for the toys and furniture, in an attempt to address his potential for spitting (Foulkes, 1948).

The co-leaders made specific attempts to address Liam's potential difficulties and expected to be under constant pressure to be vigilant to avoid scapegoating and bullying by the other children. Some of Liam's difficulties, identified by his foster carers and school, were visible in the group; for example, his difficulty with the ending of group sessions and his anxiety about whether his foster carers would collect him at the end of the session. However, the marked separation difficulties and the aggression and spitting, previously observed at school, were not seen.

It was interesting that Liam presented no problems separating from his foster carers, in marked contrast to Denham whose difficulties were not anticipated. It is difficult to determine whether such active preparation for Liam in the group (and Liam being kept so actively in mind by the co-leaders over the course of the group sessions) accounted for the absence of some of Liam's more difficult behaviours. Susan Reid (1999) emphasized the importance of this preparatory work. It clearly has links with what Winnicott (1965b) described as the holding environment. Woods (1993) linked it with ideas of Dynamic Administration as described by Foulkes (1948).

In focussing on Liam's separation difficulties we had significantly underestimated how enormously important the presence of the other children would be to Liam. Belonging to a small group who recognised and accepted him as a group member could explain the absence of some of his previously observed difficulties.

### **Liam in the Group**

Liam had a keen and lively interest in the children in the group. This keenness was visible at the start of the first group session when he was very eager to be taken to the group room. Once in the room, Liam became anxious and managed his anxiety by getting physically close to the co-leader and asking if he could go to the toilet. This was a familiar pattern at the start of each group session.

It proved possible to help Liam with his anxiety and his desire to leave the group room at difficult times and a pattern of getting Liam to slow down, to stop and think, seemed to be very effective. Liam's anxieties were very visible and easy to read. Towards the end of the first group session, when Liam was in touch with his anxiety about his foster carer, he tried to ring her on the play mobile phone (Session 1, p.118). Liam was, it seemed, in touch with both the imminent ending of the session and the need to return to his foster home; he was clearly missing his foster carer. As Liam's anxiety mounted, his loss of confidence in the possibility of his foster carer returning to collect him, and his fear of abandonment, became visible.

Nelly, aware of this anxiety, suddenly needed the mobile phone; it was as if she could not bear Liam's neediness. Nelly seemed to be in touch with Liam's need for a maternal object and attempted to deny him this. This triggered her own vulnerability, which she sought to locate in Liam. She appeared to symbolically need to take possession of the maternal object herself, and to exacerbate Liam's neediness. Liam had to suffer by having his need amplified.

As the sessions progressed, it was clear that this was a rare example of Liam triggering another child's projection of vulnerability. Surprisingly, Liam did not often become a target or a scapegoat in this regard. However, other children in the group were sometimes the recipient of this kind of attack. The children in the group seemed to be unconsciously in touch with Liam's vulnerability and were perhaps protective of him and did not try to exploit this. The protective presence of the co-leaders engaged in actively providing a safe environment in the group appeared to mitigate against this.

Liam's vulnerability seemed to enable the other children to step into areas they would not normally tolerate. For example, members of the group did not want to think about babies and infantile feelings. Liam, at times, made this possible.

Surprisingly, Liam seemed to be an integrated group member. Being part of the group seemed to have added importance. He gave the impression of 'belonging' to the group (Reid, 1999). He felt a part of the group even though he was more dependent on the co-leaders. In this regard, at these times, the group could be described as having a 'group state of mind' (Canham, 2002) in that, for Liam, the anxiety of being less able and different from the other group members, although visible, was not actively triggered. One might wonder about the dynamics of the group in this regard, in that all of the children's difficulties became more visible and apparent. Did Liam's obvious difficulties put the other children in the group more in touch with their own?

It became clear that the group provided Liam with a safety net that was the group (Reid, 1999). His interest in the other children and his wish to be part of the group seemed to strengthen and support him. His separation difficulties and anxieties in relation to transition were more easily identified in the group context. He had particular behaviours that he adopted at these times. He would move suddenly or shout "shut up." Liam seemed to be the child in the group for whom the theme of avoidance/being in touch was most easily recognisable, in that he appeared to be in touch with an anxiety and would quickly try to avoid this by shouting or swearing. Hearing his shouting or swearing meant that the co-leaders could track back his anxiety and support him with this.

Liam's sense of self seemed to be located in this loud shouting. This occurred particularly at times of stress and in the group his sense of self could be linked to aggression and loud opposition. When under particular stress, the need to shout "shut up" could quickly move into a more sexual arena. Liam appeared to use sexual words ("dickhead...") as a more heightened means of aggressive joining with the other children. Liam's presentation and means of joining in the group were easily understood. These defensive projections into the co-leaders of being crushed and silenced could be withstood and understood. This contained Liam's

projections and meant that more gang states of mind were avoided (Canham, 2002).

Liam was able to access the help of available adults in a way that the other children could not. Despite his learning difficulties he had a capacity to identify his need. Liam often displayed a sense of urgency in response to an unmet need and had a sense that something needed to be done and that adults could help him in understanding what that might be and how that might be achieved. This was clearly visible in the ambulance play (Session 8, p. 157).

Liam was also capable of presenting infantile aspects of himself in the group. His neediness of adults, his need for proximity and physical contact, and his need to be part of a child/adult dyad were clearly evident.

Liam could be surprisingly parental. He sought to 'parent' other children in the group. In this respect Liam seemed to engage in a transference relationship with Jason in which he openly described Jason as his baby and Jason allowed him to 'parent him'. Liam was able to take on a maternal function here. The other children in the group joined in this play. It would be easy to underestimate what a development this was for the group. Liam was perhaps in touch with the loss, whilst in foster placement, of his youngest sister Sarah who was adopted as a baby. Jason was able to manage his own losses and be comforted and have his infantile needs met; Liam appeared to be the catalyst for this kind of infantile experience.

The other children, perhaps in identification with the co-leaders, seemed to be unconsciously in touch with Liam's vulnerability and sought to protect him. At times, Liam's genetic physical disabilities were more obvious. The distinctive shape of his head, for example. This did not seem to create a tension with the other children in the group in that it did not lead to rivalry or jealousy.

## **Liam's Foster Carers**

Liam's foster carers' accounts reflected Liam within the context of their family and the problems he faced managing his external environment, the outside world, (Winnicott, 1964). They described his history in some detail and linked his smiley presentation and wish to be on good terms with everyone he met to the awfulness of his treatment in his family of origin. This would suggest that they were in touch with the precariousness and surface nature of his identity but were able to recognise small changes in this area and saw these as a development. Over the course of his placement with them they had seen massive changes in his presentation and emotional development. He was, for instance, less fearful of men and had a good relationship with his male foster carer, Mr. L.

Mr. and Mrs. L. described a change in Liam over the course of the group sessions and highlighted how he was able to ask them at the end of the group, not only whether other children were "going now" but also whether he would be leaving them too. On one level this would appear to suggest that his anxieties about leaving his foster home were increasing, but Mr. and Mrs. L. were aware that by including himself in the question of leaving, that Liam was making his own anxieties more accessible. Mr. and Mrs. L. struggled in the task of helping Liam with this, his learning difficulties made the task harder. They repeatedly asked whether continuing to foster other children who came and went added to Liam's anxieties.

There had been an example of how this was on the foster carer's mind as we walked back from the group room after the first group session. Mr. L. said they (Liam and Mr. L.) had to pick up Sarah. As soon as he said this Mr. L. gasped and covered his mouth and Liam and Mr. L. exchanged a look, a feeling, as Mr. L. acknowledged he had got the name wrong. They were going to get the two young children Mr. and Mrs. L. were currently fostering (Session 1).

Sarah is Liam's youngest sister who had lived with Mr. and Mrs. L., Liam and their daughter until she was adopted. At times of transition, losses come to the fore. This was an example of a difficulty for Liam, the loss of his sister Sarah and Mr. and Mrs. L. were in touch with this.

### **Comparing and Contrasting the Two Experiences**

In comparing and contrasting the child psychotherapist's experience of Liam in the group with the narrative accounts obtained from the foster carers' interviews, one dominant theme emerged. This was missing and loss both in relation to processing the traumatic and negative lived experience within his family of origin prior to coming into care and since coming into care, the loss of his baby sister Sarah. Other dominant themes were presentation and joining in relation to negotiating change and transition. All of these themes seemed to be pervasive in that they interfered with his relationships in the external environment in the outside world, (Winnicott, 1964). It was apparent that when these themes were identified and recognised, both within the group and by his foster carers, his overwhelming separation difficulties became more manageable.

What was less apparent with Liam, prior to the group was his need to be integrated with his peers, to be part of a group and his sensitivity to the feelings of others. His foster carers, although describing massive and healthy developments over the course of his placement with them, were highly sensitised to his vulnerability; the painfulness of his early history and the loss of his sister Sarah. It was clear from the interview narratives that Mr. and Mrs. L. shared Liam's feelings in relation to that loss.

### **How these Comparisons can Influence Further Work with Liam, his Future carers and the Professional Network**

It is important, in thinking about Liam's future, not to lose sight of the reality of his significant learning difficulties. These will continue to impede his development, his understanding, comprehension and his capacity to retain

information. Consideration also needs to be given to the nature of Liam's physical difficulties, his deep seated anxieties and the links between these and exaggerated defensive physical activity.

In addition to these intrinsic difficulties, Liam had an added vulnerability of which his current foster carers were aware. These vulnerabilities could be directly linked to his early experiences of trauma and physical abuse. As Mr. and Mrs. L. pointed out, Liam could be anxious of strangers and this paradoxically manifested itself in the absence of any sense of danger. Whilst this had an obvious link to his intrinsic difficulties, his behaviours could be seen as pacifying potential aggressors. Liam will need some support in this area in school and school would benefit from consultation and advice from Educational Psychology and CAMHS. Additional help from a Learning Disability Team would also be advisable.

Special note needs to be made of Mr. and Mrs. L.'s predicament in that they were in touch with Liam's anxieties and vulnerabilities but were also aware of the demands of external reality. They were professional foster carers and other children came and went. Mr. and Mrs. L. felt inordinately guilty about the impact on Liam of this and this guilt could also be a feature in his future foster placement. Liam's current and future foster carers will need help in managing their experience of Liam and the guilt he seemed to engender. Liam will benefit from further group work which could be undertaken in the context of his school and some direct help in recognising and managing his feelings.

#### **5.6.4 Eleanor**

##### **Eleanor in Transition to the Group Room**

In thinking about Eleanor in the group, the first thing that came to mind was her active presence along the corridor in transition to the group room. Eleanor seemed to use her foster carer, Mrs. E., as an active advocate on



her behalf. Mrs. E. would relay accounts of how Eleanor did not want to come to the group, how she asked why she had to and her long explanations of all the things that she wanted to finish at school. There was an active sense of Eleanor at school being engaged in various activities. Mrs. E. seemed to be using the transitional space along the corridor to make a bridge between the group room and Eleanor's school (Sorenson, 2005a). In addition to what might be described as Eleanor's protest by proxy, Eleanor engaged in behaviours that were similar to other children along the corridor. She walked ahead of her foster carer and the co-leader and then occupied the space in the middle of the long corridor.

### **Eleanor in the Group**

There were two images that came immediately to mind when thinking about Eleanor in the group room. The first was her need to occupy an internal space (in the tent) that seemed to link to her earliest experiences in hospital as a premature baby. The second was her appearance. Eleanor was an attractive girl of dual heritage who came to the group in an immaculate state. Her hair was plaited intricately and she frequently wore a smart red coat. In the group room, her coat was discarded immediately and over the course of the group sessions, her intricate plaits seemed to unravel. Eleanor presented at the beginning of each group session in a markedly different way to her presentation at the end. There was something about her presentation at the end of the group that seemed to be more authentic and more linked to Eleanor's sense of self.

There appeared to be something important about this that was hard to put into words. Indeed, these two processes (Eleanor in an internal space and Eleanor unravelling) seemed to be linked. One wonders whether Eleanor, in occupying an inside space, was able, however indirectly, to present herself in the group, to be seen. Eleanor, despite her hidden presentation, was frequently actively connected to the group.

Eleanor was creatively engaged in her play in the group room. Her play absorbed her. She seemed to have an unspoken relationship with Denham, in that they frequently engaged in joint domestic house play. Eleanor and Denham seemed to come together to explore key themes, perhaps linked to domestic violence and other frightening experiences.

Eleanor also had a relationship with Nelly that appeared to involve mirroring, in that they could dress together and present themselves to each other (Session material p.131-132) or build parallel, but strikingly similar, houses using the two tents (Session material p. 147). On occasions Eleanor seemed to become the most vulnerable member of the group. She was at risk of scapegoating and was a target for Nelly's projections. When Nelly was ousted out of her tent by the boys she callously evicted Eleanor from her tent (Session material p. 147-148). There were aspects of Eleanor's internal world that left her surprisingly vulnerable. One might wonder about Nelly's attack. In the context of Nelly's identification with the male aggressor, this could be an attack on femininity. Whatever the trigger, the attack left Eleanor helpless and unable to protect herself, something that was manifest in the counter-transference experience of the co-leaders who also felt unable to protect her in this instance.

Eleanor appeared to avoid direct presentation of herself in the group but was able to demonstrate that she was in touch and in contact with the group, despite her visible absence. Eleanor would make noises whilst hidden in the tent that let us constantly know of her presence and her contact with us. This brings to mind the observation of a premature baby undertaken by Lazar, Ropke and Ermann (1998). This paper highlighted the exposure of a premature baby and the baby's fight to just be and to breathe. Eleanor in the tent could be experienced as a baby in utero in that she was in touch with the noises outside the tent, just as a baby is in touch with its mother's voice and other experiences outside of the womb. This would appear to be a defence against separateness and exposure (Lazar, Ropke and Ermann, 1998).

Eleanor seemed to be in an inside place and one might speculate about how she might move from an inside place to an outside place and join directly with others. Eleanor was the only child to be absent from the group and her absence was dramatically felt by the other children. In the session that she was absent, there was a powerful feeling in the group that she was somehow lost in the building and the co-leaders had neglectfully not found her. This linked with Eleanor's inside place within the group. The impact on the other children of Eleanor's absence was overwhelming and her late arrival in the following session was greeted with excitement and relief. This was likely to be an unusual experience for Eleanor. Being ousted from the tent by Nelly in a later session might be seen as punishment for the anxiety Eleanor's absence created in the group.

Eleanor was able to join the other children in developing a sense of herself in opposition. Her identity seemed tentatively linked (domestic house play) with an internally organising maternal figure. One might wonder how this presence might be established in her external world.

### **Eleanor's Foster Carer**

In her first interview Mrs. E. seemed in touch with the Eleanor that we saw at the beginning of each group session. She described Eleanor's identity in terms of being a cute, strong princess (Eleanor in her red coat and immaculate plaits). She also described Eleanor as being affectionate and vulnerable. What she seemed to be in touch with was a contradiction in Eleanor; her being both strong and vulnerable. One might wonder whether this referred to Eleanor herself or Mrs. E.'s perception of her. Mrs. E. seemed genuinely in touch with aspects of Eleanor's affectionate and humorous nature.

Mrs. E. had an acutely painful sense of Eleanor's early history. She thought that Eleanor was strong in this regard because of the open nature in which she constantly dealt with the impact of her history. Mrs. E. described how on her way to school, Eleanor was driven directly past her mother's house

and that she always looked inside, something that her older sisters could not do. In this way, one can see in Mrs. E.'s mind the coming together of Eleanor's strength and vulnerability.

Mrs. E. was also in touch with Eleanor's lack of boundaries and her vulnerability to sexual exploitation. Mrs. E.'s account was filled with aspects of Eleanor being exposed in terms of her vulnerability, exposed in terms of her clothing, exposed in terms of her inability to separate. Much of Mrs. E.'s account seemed to be linked to Eleanor's experience as a premature baby in hospital and her return to her family home. In this sense, Mrs. E.'s account of Eleanor in her interviews and how she presented in the group seemed to be connected. There was a powerful sense in the group of Eleanor being in an inside place that felt rather like an incubator. This linked with Mrs. E.'s descriptions of Eleanor being "protected and wrapped up in cotton wool."

There was little sense of Eleanor in her family of origin and the high level of domestic violence that took place. Mrs. E. gave lengthy accounts of how Eleanor gathered strength from these early experiences, but these accounts lacked detail. There was little explanation of how Eleanor had gathered her strength.

In subsequent interviews, Mrs. E. was able to describe how Eleanor was able to separate more. She could now sit and do her homework. Mrs. E.'s own difficulties with Eleanor and separation were also visible in the interviews. Mrs. E. described in some detail her need to structure her close contact with Eleanor. Mrs. E. would cuddle Eleanor just before dinner knowing that when the meal was ready she would have a good reason and one that Eleanor would be able to understand when the cuddling came to an end.

## **Comparing and Contrasting the Two Experiences**

In comparing and contrasting the child psychotherapist's experience of Eleanor in the group with the narrative accounts obtained from her foster carer's interviews, a common theme that emerged seemed to be Eleanor's strength and vulnerability. Whilst Eleanor's vulnerability was visible in the group sessions, her strength was less apparent. In Mrs. E.'s account, Eleanor's strength and vulnerability seemed to co-exist.

Eleanor's difficulty with separation only became really apparent in Mrs. E.'s later interviews. It then became possible to make more sense of Eleanor's activity on the way to the group room. Eleanor's difficulties in negotiating transition were likely to have been masked by Mrs. E.'s protest by proxy; Eleanor's long list of complaints about why she needed to attend.

It is interesting that Eleanor's difficulty in negotiating transition only became obvious when linked with her foster carer's accounts. Thinking about this rather complex difficulty seemed to resonate with her difficulty in the group room and her need to be in a safe inside place.

Similarly, Eleanor's difficulties with presentation and joining were likely to be missed in her dash to be in a safe inside place in the group room. Eleanor had a need to locate herself within her object; separation from her object was too difficult to contemplate. Mrs. E. had clearly picked up this difficulty in her descriptions of her need to structure cuddling times for Eleanor. Separating at the end of these times, perhaps felt like a painful, physical tearing and Mrs. E. worked hard to structure this so Eleanor could understand why she and Mrs. E. needed to separate.

In this regard she had perhaps the greatest difficulty of all the children with presentation and joining. Eleanor's difficulties lay in what Youell (2014) would describe as acute separation difficulties. An inability to separate could be linked to an inability to manage feelings in relation to missing and

loss. Her sense of self is inevitably linked to being separate so Eleanor is likely to have difficulties in this regard.

Youell (2014) has emphasized the importance of distinguishing between primitive separation anxiety and the ordinary heightened anxiety at times of transition and change identified by Wittenberg (2013). What the difference might look like in ordinary development and what they might look like for young vulnerable children in transition were clearly important questions for this research project.

### **How These Comparisons Can Influence Further Work with Eleanor, her Future Carers and the Professional Network**

By comparing and contrasting the child psychotherapist's experience of Eleanor in the group with the narratives from the interviews with Eleanor's foster carer, experiences were shared. It then became possible to carefully consider the nature of Eleanor's strengths and difficulties and reflect on what support the new foster carers and the supporting networks were likely to need.

There were areas of development in which Eleanor appeared to be progressing. Mrs. E. had highlighted a number of these. Mrs. E. thought that Eleanor talked about Nelly and saw her as a friend and that despite her protestations, Eleanor was positive about the group sessions. Mrs. E. felt that Eleanor had made dramatic changes over the course of the group sessions. Mrs. E. linked these specifically to the group when she remarked that Eleanor seemed transformed by the group. It had made a significant difference to her capacity to separate and be "independent." Eleanor had a quiet presence in the group but was able to join the other children in their play. Her play seemed to involve a lot of ordering of internal space, for example the tent.

Eleanor seemed to have an almost hidden difficulty with separating. This was masked by her activity along the corridor and the use of her foster

carer in protesting by proxy. Closer examination of both Eleanor in the group and the interviews with her foster carer explicitly highlighted her difficulty in this area when she described Eleanor's difficulties with separation (Third interview p. 174). Mrs. E. emphasized the changes that Eleanor was making in relation to the development in her capacity to separate.

Despite exploration of Eleanor in the group and in the interviews with her foster carer Mrs. E., there remains an elusive quality to Eleanor's difficulties. Experience would suggest that although Mrs. E. was describing some development, her vulnerability is likely to remain. This could be addressed by detailed observations of Eleanor in school and regular meetings with school to monitor her emotional, social and cognitive development. School will need support in understanding Eleanor's complex difficulties and advice on how she might be supported. There will be aspects of Personal and Social and Education provision that could be utilised in supporting Eleanor. Her future foster carers are likely to need support in helping her to manage separation difficulties, sense of self, negotiating transition and presentation. Eleanor might need individual psychotherapy and separate work in understanding her early history.

#### **5.6.5 Jason**

There were aspects of Jason that were highly visible in the group but unfortunately there were no interviews with his foster carer to compare and contrast the experience of Jason in the group with. As a result this section is severely limited because of the absence of additional information from his foster carer. Jason's presence in the group stands alone and it is only this understanding that informs this section.

## **Jason in the Group**

Jason, like the other children in the group, struggled with the experience of missing siblings. He also struggled with the possibility of a further move. He seemed more susceptible to this than the other children and the co-leader saw him as the most vulnerable of the children in the group.

Jason had a prominent presence in the group evidenced by the material presented in the 'Findings of the Children's Psychotherapy Group' section. He had a somewhat porous quality in the group, visible in the way the other children related to him. Jason was a central figure in the other children's play and joined in with them easily. He was a baby that Liam could parent. Jason enjoyed wrestling with Denham and involved himself with his collapsed, deadly/sleeping play and tried to engage actively with Nelly in dressing up.

Jason's play with the other children would suggest a desperate need to be in touch with, involved and part of their play. Jason seemed to be in touch with an experience of missing that was hard to think about but was present in the group.

In a number of sessions there were instances when one of the other children had made a safe, soft space in the tent, in the doll's bed or in a part of the room and had then vacated this space. Jason frequently leapt into that space occupying it in a seamless way and claiming it. In a similar way Jason frequently played a curious game of hide and seek in which he would secretly swap places with one of the other children. The co-leaders would be thinking that another child was in that space and were surprised to find Jason. There was a tricky quality to this that indicated some difficulty and a real sense that Jason felt that he could not have a 'space to be' unless he had stolen or borrowed this.

Jason's need to place himself in the vacated space of another suggested that his sense of self felt very precarious. Jason seemed to have an identity



that shadowed the other children in the group; as a result his identity felt borrowed and had an adhesive quality. Jason took an active role in the other children's play following their lead and their need to explore.

In addition to this seeking of an identity by occupation or by stealth, a frequent experience was one in which Jason's identity became blurred with another child in the group. This blurring of identity occurred most frequently with Denham but it also occurred, albeit less often, with other children.

Jason seemed to be in a state of projective identification with his absent siblings. He described himself as his older brother's twin. He called Denham by his older brother's name. There was some confusion and blurring of identity between Jason and other children in the group. This seemed linked to Jason's anxiety about being forgotten. Jason, it seemed, not only felt he had to steal the physical space and comfort he needed, he had to actually become someone else to get his needs met and ensure that he was not forgotten. This presentation is likely to have significant implications for Jason's developing sense of identity.

Jason appeared to struggle to present himself directly in the group. He often presented himself in a disguised way, dressing up as Spiderman or as a scary vampire. Jason used material from the dressing up box to create an identity, but was vulnerable to projections and ridicule from other children in the group. Nelly was often the source of these projections. Jason seemed to carry an anxiety and sense of panic for the group. As a way of managing this, Jason often invited Denham to join him in aggressive oppositional play. Denham was able to resist Jason's invitations.

Looking at the experience of Jason in the group, the researcher had vivid images of Jason in all five core categories but was not able to explore these pictures further with Jason's foster carer. This was extremely disappointing and will be disappointing to the reader. This disappointment may give rise to an idea that another child (with a fully participating foster

carer) could have more usefully been included in the research project instead of Jason.

Yet despite the absence of the interviews with Jason's foster carer a stark picture of Jason's difficulties emerge from the group. Indeed the absence of the interviews underlines these difficulties because in one way Jason is the least connected child in the group. This gives us an added area to consider when applying the findings of this research project more generally (see below).

### **Thinking about How the Experience of the Children's Psychotherapy Group Might Influence Further Work with Jason, his Future Carers and the Professional Network**

Clearly Jason needs to feel that he belongs, that he has a space in a family that is his in his own right; a space which can sustain him and hold onto him. Jason has been desperately seeking a family for such a significantly long period, his future foster carers may need some support in understanding that although he might join their family, perhaps in a very immediate way and it might feel like he has always been there, he is a fragile and emotionally vulnerable boy who will need significant help in really believing that he can belong.

Jason will need consistent parenting and stability and a consistent experience of knowing where he is. He is a boy with significant emotional difficulties who actively invites emotional contact but has a deep-seated anxiety that he is not wanted and is unlovable. Jason is the boy in his sibling group who appears to get forgotten. He has verbalised this. His future carers are likely to need support and advice about how to provide consistent parenting and stability and an experience of Jason knowing where he is.

Jason will need help in establishing a sense of identity and self-worth. He will need intensive support in his future placement and the suggestion

would be that he might benefit from some joint psychotherapy; Jason together with his future foster carers. His foster carers would need additional support. Jason would also benefit from some nurture group work at school.

### **5.7 Further Information on the Children since the Research Project was completed**

Since the research was completed, Denham has remained in his foster placement with his two older brothers. This is now a long-term placement and family therapy has been provided for Denham, his brothers and their foster carers.

Nelly and her twin brother did not move to the previously identified adoption placement but moved to another short-term placement during which sibling group work was undertaken and support provided to the wider professional network. Nelly and Mark are now in a long-term placement and are doing well. Considerable input was provided to their new school.

Liam has remained with Mr. and Mrs. L. who have since initiated a Special Guardianship Order and Mr. and Mrs. L. are currently Liam's guardians. Liam has a permanent placement with Mr. and Mrs. L. On-going work was provided to Liam's school and the learning disability team took responsibility for this work long-term.

Over the course of the group and the interviews a decision was made that Mrs. E. would be Eleanor's and her sisters' long-term foster carer. Mrs. E. was very pleased with this decision. On-going support has been provided.

Sadly Jason has had a number of foster placements and the issue of permanency is still to be addressed. CAMHS-LAC input has continued.

## **6. Conclusions**

This chapter re-presents the research question and re-visits the aims of this research project. It follows the course of the research and discusses the findings. The findings are considered in their own right and again in terms of their implications for policy and practice. Recommendations are made.

A critique of the study is provided which identifies areas of strength and weakness and addresses the suitability of the research methodology chosen.

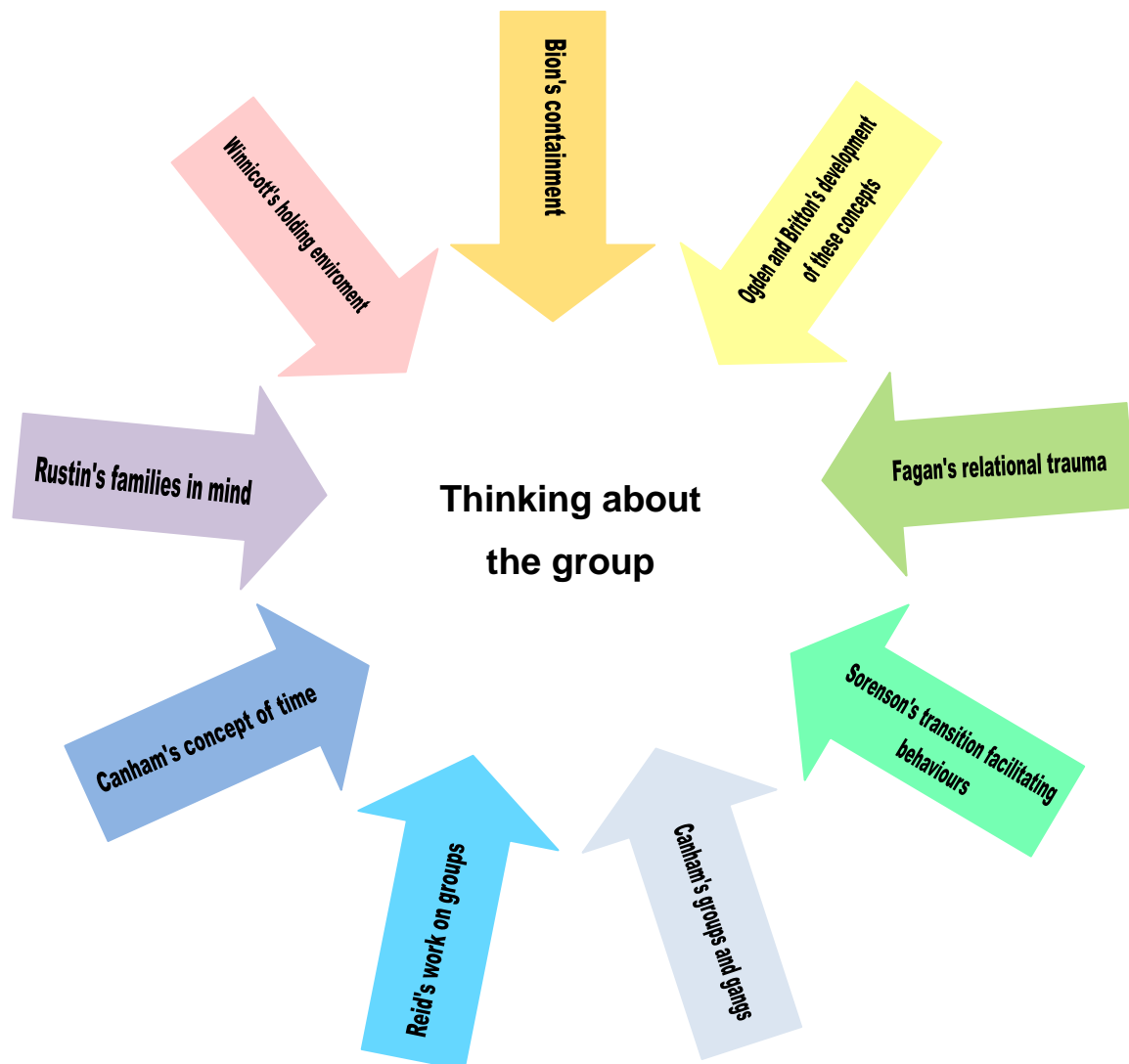
### **6.1 The Research Project**

The research question involved comparing and contrasting two sets of qualitative data focussing on what could be learned from comparing a child psychotherapist's experience of children in a children's psychotherapy group with the narrative accounts of foster carers describing the same children in their care.

The literature review revealed significant gaps in the literature in relation to the emotional and lived experience of foster carers and the impact on children of being in transition and between placements. There were also gaps in the literature in terms of the experience of children within children's psychotherapy groups generally and perhaps more importantly, for this research project, their usefulness in gaining information about children's internal worlds and the nature of their relationships.

Despite these gaps the literature review highlighted psychoanalytic theories, concepts and studies that were utilised in the setting up, undertaking and developing of this research project.

**Fig 6. Psychoanalytic Concepts that were utilised in thinking about the group.**



The literature review examined relevant papers that added to the thinking in regard to this research project and highlighted a number of gaps in the literature. In a modest way this research project adds to knowledge in this field.

The structure of this research project was intricate and complex, in that ideas and issues that emerged in the group were re-visited both in the context of the group and again in the interviews with the children's foster carers. The two sets of data were compared and thoughts gathered about

the strengths and difficulties of individual children and what support they were likely to need, both currently and in the future. This process highlighted the nature of the children's difficulties, in terms of both their complexity and their often masked or hidden presentation.

The research project illustrated what could be described as a pulsated intervention (Pyroos and Nader, 1993; Wakelyn, 2008) in that the experience of the group and the interviews with the children's foster carers represented a pulsated intervention for each of the children in the group. Meetings with schools and key professionals provided additional contributions to these pulsated interventions.

Although all of the details of aspects of work undertaken with the professional networks are not within the remit of this research project, it is clear that undertaking pulsated interventions in this way led to more intricate assessments and more detailed work with the children, their foster carers and their professional networks. The research project looked at the contribution of the group and the interviews and how this led to more collaborative work with the different professional networks. An increase in collaborative working amongst professionals working with individual children appeared to be a by-product of group working.

The framework the pulsated intervention provided and the application of the five core categories derived from the analysis of the group and the four core categories from the interviews were useful in assessing and treating the children in the group. A matrix of care (Kenrick and Tollemache, 2006) was established around individual children providing what McLoughlin (2010) has described as 'concentric circles of containment'.

## **6.2 The Research Project - the findings of the study: Part 1, The Group.**

The 'main tool of the child psychotherapist is working and thinking as the session unfolds with the transference: that is, understanding the inner world from the present relationship of the child with the therapist' (Kenrick and Tollemache, 2006, p. 81). The unfolding transference was found to be key to understanding what could be learned from a children's psychotherapy group.

The presentation of the analysis of the group gave a detailed account of the nature of this unfolding transference and its pertinence when assessing and treating young vulnerable children with complex difficulties. Valid information emerged that was useful in identifying the nature and structure of each of the children's internal worlds and their complex difficulties in relation to fundamentally important developmental tasks. This builds on Fagan's work (2011) on relational trauma which stresses the importance of pulling together the three domains of developmental support, transference interpretation and links with the child's experiences outside of the therapy session.

The analysis of the group identified five core categories: Negotiating Transition, Presentation and Joining, Sense of Self, Missing and Loss and Avoidance/Being in Touch. These core categories described important developmental tasks the children faced. Data were presented that indicated the children's capacity to negotiate transition and change, manage separating and being separate, to present themselves to and join with others, develop a sense of self and identity, process the experience of missing and loss and manage and process feelings in relationships with available adults.

The five core categories identified over the course of the group highlighted the children's difficulties in these areas and the corresponding gaps in their development. For example, Missing and Loss was a core category and the

presentation of findings from the group indicated the depth of the task involved in supporting the children sufficiently enough to enable them to begin to think about missing and loss. In this research project these difficulties and gaps were linked to relevant psychoanalytical thinking and important psychoanalytical concepts.

In addition the research project added to the existing literature by highlighting how, in practice, these concepts affected development. It considered how established, developmentally inhibiting ways of relating might be interrupted and how the children might be supported in developing more appropriate and enhancing relationships. The difficulty and size of this task was clear. This research project has added to existing knowledge in this field of study.

The group offered the children within it the possibility of a full assessment of their difficulties and the beginnings of therapeutic work designed to address these. In the group the children's difficulties appeared to come alive and the children acquired a presence in their own right. Understanding children's presentations can be difficult as they may project states of mind or re-enact relationships or experiences which can be disturbing (Bion 1962b). These projections are often a means for the children of communicating their undigested experiences. The group offered the children a space in which they had the opportunity to project and have their projections thought about, processed and understood; an experience they perhaps missed in early infancy.

Although the group was a brief intervention, it offered the children a chance to begin to make relationships. In this context, the researcher argues that the core categories, and particular phenomena that can be seen in each of the core categories, highlight the subtle changes that might represent in some instances attempts to connect and begin to relate for individual children.



The detailed exploration of these phenomena in the group revealed original ideas and concepts about oppositional ways of relating that appeared to be, on occasions, a move away from more defensive ways of relating; Bick's (1968) ideas about second skin formation and Meltzer's (1975) concept of adhesive identification. These oppositional ways of relating could be linked to the five core categories; 'identity in opposition', 'structure in opposition', 'connecting in opposition', 'developing a sense of self in opposition'... The researcher believes that in an embryonic way this work looks at mobilising development in areas in which the child's development has been particularly static and stuck.

These core categories warrant further exploration and development. They each represent important areas for further study.

### **6.3 The Research Project - the findings of the study: Part 2, The Semi-Structured Interviews**

The unfolding transference within the group described above is magnified in depth when juxtaposed with the data from the interviews with the children's foster carers. The complexity of the children's difficulties and their often hidden and masked nature are set in the context of the developmental tasks identified in the foster carers' interviews. The four core categories identified in the analysis of the interview data: Identity, History, Development and Separation Difficulties identify four developmental tasks in the context of the children's relationships with others. These are: the establishing of an identity in the context of a shared relationship, managing the impact of one's history, following a course of development and managing separation. In this way the unfolding transference can then be understood in relation to the children's important relationships outside of the group.

The emerging pictures of the children in the group are placed in the context of these developmental tasks. We see, for example, four of the children's

foster carers attempting to convey their sense of the identity of the child in their care; we can see this emerging and taking shape in a dynamic way which changes over the course of the interviews. The foster carers are engaged in a process of trying to understand and present the reality of their experience of the child in their care. Themes that emerge in the group can be identified and developed in the foster carers' interviews. There were striking examples of this: in Mr. and Mrs. D.'s, Denham's foster carers, increasing awareness of Denham's difficulties when discussing his presentation and their sense of his identity; Mr. and Mrs. N.'s, Nelly's foster carers, sensitive exploration of Nelly's attempts to manage her history and adjust to the painful experience of being in two very different families; Mr. and Mrs. L.'s, Liam's foster carers, discussion of the developments Liam had made since he came into their care and Mrs E.'s acute portrayal of Eleanor's separation difficulties and the impact these had on her.

The research project was unique in that it attributed as much significance to the foster carers' narrative accounts as was given to the child psychotherapist's experience of the group. By doing this, it was possible to correlate the two sets of data and build a more comprehensive picture of each child.

The findings from the interviews clearly focussed on the foster carers' narrative accounts of individual children. These accounts were useful in understanding the internal worlds of the children, both in terms of their presentation within the group and how they presented to their foster carers.

When we place the findings from the group beside the findings from the interviews the focus on individual children is sharpened and the picture that emerges gathers increasing depth. The pictures of the children that materialise in the group appear to be replicated in their foster carers' interviews and we see the children and their difficulties alive and interacting within their foster carers' families. Aspects of their relationships and the developmental tasks they face become more evident. In comparing and contrasting the two sets of data detailed information emerged that would

not have been apparent otherwise. This information will be useful in supporting the children, their foster carers and the professional networks that sustain them.

#### **6.4 Implications of the findings: Suggestions for Further Research in this Field.**

Undertaking further research which extends the focus on foster carers could be a useful development following this research project. For example, a psychotherapy group for foster carers would be a useful area for further exploration. This could be distinctly beneficial because the focus would be on foster carers in their own right and this might highlight other areas for study.

Psychoanalytic group work with foster carers would provide detailed information about the foster carers, their relationships with the children in their care, their unconscious preoccupations and the effects of this on their parenting of fostered children and their capacity to support these children and manage their projections. Group work is likely to reveal aspects of parenting traumatised children we have not considered and this could stimulate further research.

In addition to the possibility of a foster carers' group, the researcher is interested in pursuing further research with foster carers using semi-structured interviews. Whilst interview schedules would be influenced by the research question in any new research project, the experience of using the interviews in this study could be utilised. If further research was undertaken involving interviews with foster carers the researcher would consider using an alternative methodology (see below).

In researching this area further it would also be advantageous to harness the work and experience of other child psychotherapists, developing and building on knowledge and experience in this area.

## **6.5 The Research Project - Implications Regarding Methodology**

The experience of undertaking this research confirmed using a psychoanalytic frame within an Applied Grounded Theory Methodology as a methodology of choice for analysing a children's psychotherapy group. In analysing the group material, it was vital not to miss the development of crucial themes and essential temporal aspects and the careful detailed analysis of initial and focussed codes was hugely important in terms of understanding the complex difficulties these children face. In analysing and coding the data from the group, aspects of the children's difficulties were revealed in such a way that would not have been possible by merely relying on either a psychoanalytic frame or an Applied Grounded Theory Methodology: the combination of the two provided optimised results.

Using an Applied Grounded Theory Methodology to analyse the material from the foster carers' interviews however did not yield the same quantity or quality of detail, evidenced by comparing the number of initial codes and focussed codes generated in the process of analysing the two sets of data. There appeared to be a number of difficulties in using an Applied Grounded Theory Methodology for analysing the interview data that were not apparent in analysing the group data. These difficulties proved hard to locate.

It was not immediately obvious whether this was a direct result of the choice of methodology, in that a different methodology might have been more suitable and yielded better results or as a consequence of the research design. Reflecting on the research design, as a child psychotherapist with a keen interest in psychoanalytic group work, the researcher had the idea that bringing the individual foster carers' interviews together in the research project might have provided greater detail.

In the research project the interviews are analysed in relation to individual children and the four core categories are explored sequentially. There is a thought that if the four core categories themselves had been analysed

separately and the presentation for each of the children placed side by side together, the individual foster carer's experience might have been given greater definition and depth, rather like the children in the group.

The researcher is aware that during the course of the interviews with the foster carers there were experiences of a shared finding, a shared recognition of the child being discussed and that these experiences are not always apparent in the interview data.

The difference in detail and depth between the initial analysis of the group and the initial analysis of the interviews may be linked to the absence of the use of a psychoanalytic frame in the initial analysis of the interview data. A psychoanalytic frame was used later to compare the two sets of data.

The experience of analysing the interview data would suggest however that another methodology might be sought for any further research project and that this choice of methodology might be usefully piloted prior to any investigation taking place.

Despite this the findings of this study may be relevant to others carrying out similar work and to those working with children's psychotherapy groups. Experience working with groups can be of enormous benefit in extending child psychotherapy skills in individual psychotherapy and clinical practice generally.

## **6.6 The Research Project - Limitations of the Study Re-visited**

This research project was not without its limitations. The reliability of this large volume of analysed data in terms of its generalizability is significantly compromised by the small sample size. It is also compromised by the fact that only four of the five foster carers opted to take part in the interviews and only 11 out of a possible 15 interviews took place.

To operate within the constraint of the structure of this research was challenging. The breadth of research experience unfolds and unpacks itself in very much the same way as the unfolding transference; it cannot be fully anticipated. For instance, the eventual reluctance of one of the foster carers to take part in the interviews was unexpected. The foster carer attended the foster carers' groups and fully supported Jason in the group but the absence of the interview data was significant and seriously impeded the process of trying to present a 'whole' picture of Jason (Hollway and Jefferson, 2000).

The reader will have felt this acutely as Jason's presence in the group was highly visible in terms of his actual presence and the presence of his difficulties. This absence will no doubt be underlined by the fact that of all of the children Jason was the only child in the group for whom the need for stability and permanence remained unmet. This experience resonates with the experience in clinical practice when we are unable to effectively engage a foster carer or other professional in working with a child and the consequences of this. It could be argued that in this way the research project reflects clinical practice and the importance and centrality of the task of engagement.

Extensively analysing valid aspects of the unfolding transference within the group and comparing this with the data from the interviews with the children's foster carers' requires ample time and space. Inevitably other equally valid paths of investigation have necessarily been curtailed.

Whilst some answers have been located others have remained elusive.

## **6.7 Building on the Learning from this Research Project**

In order to facilitate and promote further understanding and study in this important area, the researcher has recently moved to a child

psychotherapy post in a new Infant Mental Health team; to what, on occasions, can feel like an early intervention team for CAMHS-LAC.

There are plans to provide training for foster carers, social workers, children's centres and educational staff on early development. The researcher plans to use the experience gained in this research project in her contribution to this training. Specific emphasis will be placed on exploration of the core categories arising from this research project. It is hoped that this will facilitate deeper understanding of the needs vulnerable young children have for structure and support with essential developmental tasks. The impact on the professionals of undertaking this work will also be considered.

Looked after children, with experiences of early trauma and disruption, often lack an internal structure that enables them to process experience. In ordinary development the processing of experience helps to provide a template for negotiating relationships. In addition looked after children can lack an external structure, which could help them compensate for the gaps in their development. There is a need for heightened support in the development of these internal and external structures. An early and thorough, detailed assessment of the nature of the children's difficulties is required. These assessments need to include the children's schools, the foster carers and the professional network.

The core categories: Negotiating Transition, Presentation and Joining, Sense of Self, Missing and Loss and Avoidance/Being in Touch are of particular importance in this regard. The core categories will continue to be held in mind by the researcher in her new clinical setting, particularly when working with future children's psychotherapy groups and other groups.

Indeed, examining the usefulness of the core categories is on-going. For example the researcher is currently involved in co-leading a psychotherapy group provided by the Infant Mental Health team in which she works, supporting pregnant mothers with difficulties in relation to anxiety and

depression. The findings of this research project have directly informed this work.

In the context of the group for pregnant mothers, the core category of negotiating change and transition could relate to the realization and reality of becoming pregnant and all the multiple changes that being pregnant involves. These relate to physical, emotional and intra-psychic changes.

In the pregnant mothers' group the experience of being pregnant appeared to bring together themes of negotiating change and transition and a sense of self and identity. Negotiating a changing work role, a changing relationship with their bodies, with themselves as individuals and changes in their important relationships with their partners and their families could be all consuming. The impact of all of this and important lifestyle changes on their sense of self and identity and their relationships with others proved a useful starting point for exploring the emerging material. The mothers' anxieties in these areas could be tracked as could their emerging relationships with their babies in utero. The core categories in the research project helped to identify and develop new themes specific to the pregnant mothers' group.

The findings of this research project have many implications. They are useful in a wide variety of ways. They may, for example, be of substantial clinical benefit to other child psychotherapists feeling overwhelmed and struggling to make sense of children's presentations in a children's psychotherapy group.

## **6.8 What are the Policy Implications of this Research Project for Looked After Children more generally?**

Although preschool children in care constitute a high risk group for mental health and developmental disorders, their needs often go undetected and therefore opportunities for early intervention and



preventative intervention are being missed... Special integrated multidisciplinary services for preschool children in care may be necessary to deal with the problems of low detection rates, low referral rates and lack of targeted interventions.

(Hillen and Gafson, 2013, p. 210)

This research project has highlighted how important it is to address the needs of children in care as soon as possible and consider what type of assessment might best identify these and what interventions might usefully address them.

The National Institute of Clinical Excellence (NICE) have just published New Draft Guidelines for Consultation (June 2015) on 'Children's attachment in care, attachment in children and young people who are adopted from care or at high risk of going into care'.<sup>29</sup> These guidelines look at what NICE describes as attachment difficulties and what this research project might describe as relationship difficulties resulting from 'innumerate early environmental failures' (Winnicott, 2012).

The Infant Mental Health Team in which the researcher works is currently consulting with local children's service commissioners about the NICE guidelines and the assessment of young children (under 5) in care, adopted from care or at high risk of going into care and a plan to pilot a number of assessments of young children is being considered.

Young children in care, adopted from care or on the 'edge of care' are likely to have had experiences of trauma and disruption that make the tasks of early development infinitely more difficult. The experience of this research project will be extremely useful in this process.

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<sup>29</sup> NICE are about to publish a second consultative document that focuses on attachment in infancy.

This research project is of use in thinking about these guidelines, both in terms of the core categories that emerged and the need for collaborative working.

What has been learned from this research project and is this useful in thinking about NICE guidelines?

- Children with early experiences of trauma and disruption can have difficulties as a result of their unfavourable early conditions. These difficulties can be pervasive, complex, enduring and potentially long-term or even life-long.
- The long-term consequences of early trauma 'include problems with affect regulation, difficulties in generalizing from one experience to another and shifts between phantasies of omnipotent control and sudden helplessness' (Fagan, 2011).
- These kinds of difficulties and vulnerabilities can make ordinary developmental tasks exceedingly problematic. Children with early experiences of trauma, disruption and uncertainty are liable to have difficulties in negotiating a wide range of situations.
- These children's difficulties and vulnerabilities can be hard to identify and recognise due to their fluctuating nature, their complexity and the fact that they are often hidden or masked. As a result it is vitally important not to underestimate the depth and reality of their difficulties and vulnerabilities. Observation and assessment that leads to early and increased recognition and treatment of their difficulties is enormously important.
- These children's difficulties are particularly present at times of transition and change. Over the course of this research project the researcher developed a painful awareness of the more marked

difficulties children, with histories of early trauma and disruption, can have with transitions. Transitions in the present can evoke memories of earlier painful transitions and highlight gaps in the children's development.

- Negotiating Transition was a core category in this research project that encompassed managing transition and change.
- Transitions can be visible and apparent or invisible and not very obvious.<sup>30</sup> Often these not very obvious transitions are only identified by a sudden, inexplicable rise in difficult behaviours. Negotiating transition and change can stir up a wide variety of difficulties and the child might need preparation and support with these.
- The young foster child in transition is unsure of their future and lives with uncertainty. He/she is faced with the task of adjusting to developmental tasks whilst waiting to move and moving to a new home environment.
- Presentation and Joining is another core category in this research project and an area that warrants the same attention required to enable a child to manage the demands of transition. Presentation and joining includes aspects of finding and being found, meeting and being recognised, and engaging or attempting to engage with the other. These are important aspects of dyadic relationships and involve important social skills that children with early experiences of trauma are likely to be deficient in. Their difficulties and deficiencies in this area might be hidden or masked. Identifying and recognizing these difficulties makes addressing them possible. The child's nursery or school are good areas for addressing these difficulties

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<sup>30</sup> When the structure of the circle ended, there was often a marked 'invisible' difficulty as play opened; it appeared that the children at this time could often have an experience akin to a 'sudden loss' or 'falling' (Boston and Szur, 1983) (Session material p118). Key times of transition in the group proved to be: separating, going through doors, moving in and out of the group circles, commencing free play, the ending of sessions and leaving.

and setting up assistance in this way can help to create a matrix of care (Kenrick and Tollemache, 2006) and circles of containment (McLoughlin, 2010) that can provide support for the child, their foster carers and the professional networks maintaining them.

- It seems important to link support in this area to what is recorded at LAC Reviews; that is, finding a way of giving the same kind of attention to the child's emotional, social and educational development and the development of his/her peer relationships as is currently given to dental and medical appointments. This could be a way of safeguarding the importance of these key areas.
- Difficulties with presentation and joining can mask separation difficulties making them hard to detect.
- For these vulnerable children the provision of containment (Bion, 1962b) and a holding environment (Winnicott, 1965) is both a struggle and an on-going long-term task.
- A Sense of Self was another core category in this research project. For the children in the group and perhaps for looked after children in transition more generally, a sense of self was often rooted in competition, a borrowing of identity, twinning or blurring. This suggests that developing a sense of self is another area of development these children are likely to be vulnerable in. This would need to be addressed.
- Missing and Loss was the fourth core category in this research project. It proved surprisingly difficult to identify the children's experiences of missing and loss. The research project offered some evidence as to how unprocessed experiences of missing and loss can impact on development and the task faced in supporting the children with this.

- The children are likely to need considerable support in this area with naming emotions; help with the expression and recognition of their feelings. This is likely to be an important area of work.
- Avoidance and Being in Touch was the fifth core category in this research project and seemed to capture something essential about the children's way of relating.
- All of these core categories seemed to identify important areas of development that the children are particularly vulnerable in. Their difficulties in these areas can feel pervasive. Difficulties in each of these areas could interfere with the children's development and relationships in the external environment, in the outside world, (Winnicott, 1964).
- Widening the focus on the children by analysing and including their foster carers' interviews brought additional core categories that added new dimensions to the thinking about the children.
- Identity was the first core category identified in the analysis of the foster carers' interview data. It differed from a sense of self in that it looked at identity in the context of important relationships. The focus of the research project was on how the foster carers constructed and located their sense of the children's identity.
- This process helped to sharpen the focus on individual children and their difficulties and highlighted how these came to life in their foster carers' families.
- In addition the foster carers also described their sense of the child's History, a second core category. This covered different territory for different children with different foster carers and was another means

of the foster carers locating their sense of the children. It was also a way of trying to understand the foster carers' sense of the children's history and how this might influence their present experiences.

- The third core category, Development, described an aspect of the children's way of relating that was located in the identified changes the children had made since they had come to live with their foster carers, contrasting their ways of relating; when they first arrived to their ways of relating now. A temporal category, this core category sets the foster carers' view of the children against a general backdrop of child development and is an important area for consideration.
- Separation Difficulties was the fourth and final core category. Difficulties with separation are a normal and ordinary part of development for infants and young children. Children with experiences of early trauma and disruption however, are likely to have particular problems with separation and these separation difficulties are often linked to earlier experiences within their families of origin. The task of separating and being separate, whilst maintaining an internal or external link to a parent or carer, often takes on different dimensions for these children.
- Time spent in developing all of these areas and linking this to the NICE guidelines could be extremely productive.
- The knowledge outlined above needs to be shared and included in ordinary working practice in nurseries, children's centres and schools as well as a wide variety of professional settings such as CAMHS teams and Children's Services Departments. All of the professionals engaged in supporting children with early experiences of trauma and disruption need to be collaboratively engaged in interdisciplinary working that sets the child at the centre. They all

need to work in partnership in providing circles of containment. Schools particularly are potentially key in this regard. Links between the child and his/her foster carer, the school and the professional networks are all important. Good communication is essential between child psychotherapists, social workers, foster carers, teachers and other relevant professionals.

Although limited in scale, this research project is a contribution to professional practice and knowledge in the field. Complex issues that merit additional study have been highlighted and it is felt that this research project provides the basis for continued focus in uncharted territory.

## 7. Bibliography

Ainsworth, M. D. S., Blehar, M., Waters, E. and Wall, S. (1978) *Patterns of attachment: A psychological study of the strange situation*. Hillsdale, NJ: Lawrence Erlbaum.

Ainsworth, M. D. S. (1985) 'Attachments across the lifespan', *Bulletin of the New York Academy of Medicine*, 61(9), pp. 792-811.

Ainsworth, M. D. S. (1991) 'Attachments and other affectional bonds across the life cycle' in Parkes, C. M., Stevenson-Hinde, J. and Marris, P. (eds.) *Attachment across the life cycle*. London: Routledge, pp. 33-51.

Ainsworth, M. D. S. and Eichberg, C. (1991) 'Effects on infant-mother attachment of mother's unresolved loss of an attachment figure, or other traumatic experience', in Marris, P., Stevenson-Hinde, M. and Parkes, C. (eds.) *Attachment across the life cycle*. New York: Routledge, pp. 161-183.

Altheide, D. L. and Johnson, J. M. (1994) 'Criteria for assessing interpretive validity in qualitative research', in Denzin, N. K. and Lincoln, Y. S. (eds.) *Handbook of Qualitative Research*. Thousand Oaks CA: SAGE Publications, pp. 485-499.

Alvarez, A. (1992) *Live company: Psychoanalytic psychotherapy with autistic, borderline, deprived and abused children*. East Sussex: Routledge.

Alvarez, A. (1998) 'Failures to link: Attacks or defects?: Some questions concerning the thinkability of Oedipal and pre-Oedipal thoughts', in *Journal of Child Psychotherapy*, 24(2), pp. 213-231.

Anderson, J. (2003) 'The mythical significance of risk taking dangerous behaviour', *Journal of Child Psychotherapy*, 29(1), pp. 75-91.



Anderson, J. (2006) 'Well suited partners: Psychoanalytic research and grounded theory', *Journal of Child Psychotherapy*, 32(3), pp. 329-348.

Bakermans-Kranenburg, I., Van, I. and Jzendoorn, M. (1993) 'A psychometric study of the adult attachment interview: Reliability and discriminant validity', *Developmental Psychology*, 29(5), pp. 870-879.

Bany, M. A. and Johnson, L. V. (1964) *Classroom group behaviour: Group behaviour in education*, New York: Macmillan.

Barnardos Policy and Research Unit (2006) *Giving Children Back their futures, Failed by the system: The views of young care leavers on their educational experiences*. Available at:  
[http://www.barnardos.org.uk/failedby the system report.pdf](http://www.barnardos.org.uk/failedby%20the%20system%20report.pdf). (Accessed: 3 July 2014).

Barratt, G. and Kerman, M. (2001) 'Holding in mind theory and practice of seeing children in groups', *Psychodynamic Counselling*, 7(3), pp. 315-328.

Barrows, P. (1996) 'Individual Psychotherapy for children in foster care: Possibilities and limitations', *Clinical Child Psychology and Psychiatry*, 1(3) pp. 385-397.

Bartholomew, K. (1994) 'Assessment of individual differences in adult attachment'. *Psychological Inquiry*, 5(1), pp. 23-27.

Bartholomew, K. and Horowitz, L. (1991) 'Attachment styles among young adults: A test of a four category model', *Journal of Personality and Social Psychology*, 61(2), pp. 226-244.

Becker, P. H. (1993) 'Common pitfalls in published grounded theory research', *Qualitative Health Research*, 6(3), pp. 406-428.

Beebe, B. and Lachmann, F. (1988) 'The contribution of mother-infant mutual influence to the origins of self and object representations', *Psychoanalytic Psychology*, 5(4), pp. 305-37.

Belsky, J. and de Haan, M. (2010) 'Annual research review: Parenting and children's brain development', *The Journal of Child Psychology and Psychiatry*, 52(4) pp. 409-428.

Bick, E. (1962) 'Symposium on child analysis: Child analysis today', *The International Journal of Psycho-Analysis*, 43, pp. 328-332.

Bick, E. (1963) 'Notes on infant observation in psychoanalytic training', *International Journal of Psychoanalysis*, 45, pp. 558-566.

Bick, E. (1968) 'The experience of skin in early object relations', *International Journal of Psychoanalysis*, 49, pp. 484-486.

Bion, W. R. (1959) 'Attacks on Linking', *International Journal of Psychoanalysis*, 40, pp. 308-315.

Bion, W. R. (1961) *Experiences in groups and other papers*. London: Tavistock Publications.

Bion, W. R. (1962a) 'A theory of thinking', *International Journal of Psycho-Analysis*, 43, pp. 306-310.

Bion, W. R. (1962b) *Learning From Experience*. London: Heinemann.

Bion, W. R. (1963) *Elements of Psychoanalysis*, London: Heinemann.

Bion, W. R. (1965) *Transformations*. London: Heinemann.

Bion, W. R. (1966) 'Catastrophic change', *Bulletin of the British Psychoanalytic Society*, 5.

Bion W. R. (1967) *Second thoughts*. London: Heinemann.

Bion, W.R. (1970) *Attention and Interpretation*, London: Tavistock.

Birks, M. and Mills, J. (2011) *Grounded theory: A practical guide*. London: Sage Publications.

Boddy, J. and Oliver, C. (2010) *Research governance in children's services. the scope for new advice, Final Report*. London: Department for Children, Schools and Families.

Boston, M., Lush, D. and Grainger, E. (1997) 'Evaluation in psychoanalytic psychotherapy with children, *Psychoanalytic Psychotherapy*, 5(3), pp. 191-234.

Boston, M. and Szur, R. (eds.) (1990) 'Abandoned', in *Psychotherapy with severely deprived children*. London: Karnac, pp. 35-46.

Boston, M. and Szur, R. (eds.) (1990) 'Falling and being dropped', in *Psychotherapy with severely deprived children*. London: Karnac, pp. 11-19.

Boswell, S. and Cudmore, L. (2014) "'The children were fine": Acknowledging complex feelings in the move from foster care into adoption', *Adoption and Fostering*, 38(1), pp. 5-21.

Bowers, D., House, A. and Owens, D. (2010) 'Understanding clinical papers'. 2nd edition. West Sussex: Wiley and Sons.

Bowlby, J. (1969) *Attachment and loss: Attachment*. New York: Basic Books.

Bowlby, J. (1973) *Attachment and loss: Separation*. New York: Basic Books.

Bowlby, J. (1980) *Attachment and loss: Loss, sadness, and depression*. New York: Basic Books.

Bradley, E. and Emanuel, L. (eds.) (2008) '*What can the matter be?: Therapeutic interventions with parents, infants and young children*', The Tavistock Clinic Series. Karnac Books, London.

Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3(2), pp. 77-101.

Bretherton, I. (1985) 'Attachment theory: Retrospect and prospect', in Bretherton I. and Waters, E. (eds.) *Growing points of attachment theory and research*, 50(1-2), pp. 3-35.

Bretherton, I., Ridgeway, D. and Cassidy, J. (1990) 'Assessing internal working models of the attachment relationship: An attachment story completion task for 3-year-olds'. In M.T.

British Medical Association Board of Science, (2006), Child and Adolescent Mental Health. A Guide for Healthcare Professionals. [Online] Available at: [http://bmaopac.hosted.exlibrisgroup.com/exlibris/aleph/a21\\_1/apache\\_media/X83RU58YSSEN7YQ5DXAV2Q2DX3B3I.pdf](http://bmaopac.hosted.exlibrisgroup.com/exlibris/aleph/a21_1/apache_media/X83RU58YSSEN7YQ5DXAV2Q2DX3B3I.pdf) (Accessed 4 April 2014)

Britton, R. S. (1976) *Consultations in childcare*. Unpublished Tavistock Clinic Paper.

Britton, R. S. (1978) *The deprived child*. Tavistock Clinic Paper. Reprinted from Practitioner.

Britton, R. S. (1998) *Containment and the holding environment* Audio Recording, Tavistock Library.

Britton, R. S. (1998) *Belief and imagination: Explorations in psychoanalysis*. London: Routledge.

Britton, R. S. (2003) *Sex, death and the super-ego: Experiences in psychoanalysis*. London: Karnac Books.

Britton, R. S. (2005) 'Re-enactment as an unwitting professional response to family dynamics', in Bower, M (ed.) *Psychoanalytic theory for social work practice*. London: Routledge.

Britton, R. S., Feldman, M. and O'Shaughnessy, E. (1989) *The Oedipus complex today: Clinical implications*, London: Karnac Books.

Britton, R. S., Steiner, J., Feldman, M. and O'Shaughnessy, E. (2003) *The Oedipus complex today*. New York: Karnac Books.

Brown, R. and Ward, H. (2012) *Decision-making within a child's timeframe: An overview of current research evidence for family justice professionals concerning child development and the impact of maltreatment*, Working Paper 16. London: Department of Education.

Bryant, A. and Charmaz, C. (eds.) (2007) *The sage handbook of grounded theory*. London: Sage Publications.

Buchsbaum, H. K., Toth, S., Clyman, R. B., Cicchetti, D. and Emde R. N. (1992) 'The use of a narrative story stem technique with maltreated children: Implications for theory and practice'. *Development and Psychopathology*, 4, pp. 603-625.

Burnsall, S. (2004) *Regaining equilibrium: Understanding the process of sibling adjustment to paediatric acquired brain injury*. Unpublished PhD Thesis. Griffiths University, Australia.

Campbell, D. (2014) 'Doubt in the psychoanalysis of a paedophile', *International Journal of Psychoanalysis*, 95, pp. 441-463.

Canham, H. (1998) 'Growing up in residential care', *Journal of Social Work Practice*, 12(1), pp. 65-75.

Canham, H. (1999) 'The development of the concept of time in fostered and adopted children', *Psychoanalytic Inquiry*, 19, pp. 160-171.

Canham, H. (2000b) 'Exporting the Tavistock model to social services: clinical consultative and teaching aspects', *Journal of Social Work Practice*, 14(2), pp. 125-133

Canham, H. (2002) 'Group and gang states of mind', *Journal of Child Psychotherapy*, 28(2), pp. 113-127.

Canham, H. and Emanuel, L. (2000) 'Tied together feelings' Group psychotherapy with latency children: the process of forming a cohesive group', in *Journal of Child Psychotherapy*, 26(2), pp. 281-302.

Canham, H. and Satyamurti, C. (2003) *Acquainted with the night: Psychoanalysis and the poetic imagination*. London: Karnac Books.

Caper, R. (1994) 'What is a Clinical Fact?', *International Journal of Psychoanalysis*, 75, pp. 903-914.

Charmaz, K. (1990) 'Discovering chronic illness: Using grounded theory', *Social Science and Medicine Journal*, 30(11), pp. 1161-1172.

Charmaz, K. (2000) 'Looking backward, moving forward: Expanding sociological horizons in the twenty-first century: 2000 Presidential address to the Pacific Sociological Association, *Sociological Perspectives*, 43(4), pp. 527-547.

Charmaz, K. (2006) *Constructing grounded theory: A practical guide through qualitative analysis*. London: Sage Publications.

Charmaz, K. (2012) 'Reflections on a sociological journey', *Studies in Symbolic Interaction*, 38.

Chester, C. (1998) *Emotional holding: Consultation and observation of a nurture group in a primary school*. Unpublished M.A. Dissertation, Leeds University.

Chester, C. (2007) 'Time, timing and accommodation, "looked after children", groups and secondary accommodation: The geography of a safe base'. A Parallel Paper Presented at the ACP Conference 2007.

Chugani, H. T., Behan, M. E., Muzik, O., Juhasz, C., Nagy, F. and Chugani, C. (2001) 'Local brain functional activity following early deprivation: A study of post-institutional Romanian orphans', *NeuroImage*, 1(4), pp. 1290-1301.

Cleaver, H. and Walker, S. (2004) *The impact of the assessment framework*. London: Jessica Kingsley Publishers.

Collins, R. (2004b) 'Interaction ritual chains'. Princeton, NJ: Princeton University Press.

Cooper, A. and Lousanda, J. (2005) *Borderline welfare: Feeling and fear of feeling in Modern welfare*. The Tavistock Clinic Series. London: Karnac Books.

Craven, P. A. and Lee, R. (2006) 'Therapeutic intervention for foster children: A systematic research synthesis', *Research on Social Work Practice*, 16(3), pp. 287–304.

Cresswell, J. W., Hanson, W. E. Clark., Piano, V. L. and Morales A. (2006) 'Qualitative research designs: Selection and implementation', *The Counselling Psychologist*, 35(2), pp. 236 -264.

Crowell, J. A. and Treboux, D. (1995) 'A review of adult attachment measures: Implications for theory and research', *Social Development*, 4, pp. 294-327.

Denzim, N. K. (1970) *The research art of sociology*. Hawthorne, New York: Aldine.

Denzim, N. K. (2007) 'Grounded theory and the politics of interpretation', in Bryant, A. and Charmaz, K. (eds.) *The sage book of grounded theory*. London: Sage Publications.

Devi, A. and Fenn, E. (2012) "'Make sure your house is safe!' Thematic Analysis of a children's psychotherapy group', *Journal of Child Psychotherapy*, 38(3), pp. 318-334.

Dey, I. (2007) 'Grounding Categories', in Bryant, A. and Charmaz, K. (eds.) *The sage book of grounded theory*. London: Sage Publications.

Dockar-Drysdale, B. (1968) *Therapy in child care*. London: Longman's Green and Co.

Dockar-Drysdale, B. (1990) *The provision of primary experience: Winnicottian work with children and adolescents*. London: Free Association Books.

Dockar-Drysdale, B. (1993) *Therapy and consultation in child care*. London: Free Association Books.

Dowling, E. and Osbourne, E. (1994) *The family and the school: A joint systems approach to problems with children*. 2nd edn. London: Routledge.

Dunn, J. and Plomin, R. (1990) *Separate lives: Why siblings are so different*. New York: Basic Books.



Emanuel L. (2002) 'Deprivation x3: The contribution of organizational dynamics to the "triple deprivation" of looked-after children', *Journal of Child Psychotherapy*, 28(2), pp. 163-179.

Emanuel, R. (1996) 'Psychotherapy with children traumatised in infancy', *Journal of Child Psychotherapy*, 22(28), pp. 214-239.

Emanuel, R. (2004) 'Thalamic fear', *Journal of Child Psychotherapy*, 22(28), pp. 214-239.

Ettin, M. F. (1999) *Foundations and applications of group therapy: A sphere of influence*. London: Jessica Kingsley Publishers.

Fagan, M. (2011) 'Relational trauma and its impact on late adopted children', *Journal of Child Psychotherapy*, 37(1), pp. 129-146.

Fahlberg, V. (1991) *A child's journey through placement*. London: British Agencies for Adoption and Fostering.

Fairclough, N., Mulderrig, J. and Wodak, R. (2011) *Discourse studies: A multidisciplinary introduction*. London: Sage Publications.

Fairclough, N. (2005) *Critical discourse analysis in trans-disciplinary research*, Lancaster: Lancaster University Press.

Farmer, E., Moyers, S. and Lipscombe, J. (2004) *Fostering adolescents*. London: Jessica Kingsley Publishers.

Ferro, A. (1999) *The bi-personal field experiences in child analysis*. London: Routledge.

Ferro, A. (2005) *Seeds of illness, seeds of recovery: The genesis of suffering and the role of psychoanalysis*. London, Brunner-Routledge.

Ferro, A. (2011) *Avoiding emotions, living emotions*. Hove: Routledge.

Ferro, A. and Basile, R. (eds.) (2009) *The analytic field: a clinical concept*. London, Karnac Books.

Ferro, A. and Slotkin, P. (2002) *In the analyst's consulting room*. Hove, Brunner-Routledge.

Fonagy, P. (2001) *Attachment theory and psychoanalysis*. New York: Karnac Books.

Fonagy, P. (2003) 'The research agenda: The vital need for empirical research in child psychotherapy', *The Journal of Child Psychotherapy*, 29(2), pp. 120-136.

Fonagy, P. and Moran, G. (1993) 'Selecting single case research designs for clinicians', *Journal of Consulting and Clinical Psychology*, 58, pp. 684-695.

Fonagy, P., Steele, M., Moran, G., Steel, H. and Higgitt, A. (1993) 'Measuring the ghost in the nursery: An empirical-study of the relation between parents' mental representations of childhood experiences and their infants' security of attachment', *Journal of the American Psychoanalytic Association*, 41(4), pp. 957-989.

Fonagy, P., Gergely, G., Jurist, E. and Target, M. (2002) *Affect Regulation, Mentalization and the Development of Self*. New York: Other Press.

Foulkes, S. H. (1948) *Introduction to group-analytic psychotherapy*. London: Heinemann.

Foulkes, S. H. (1964) *Therapeutic group analysis*. London: Karnac Books.

Foulkes, S. H. (1975) *Group-analytic psychotherapy: Method and principles*. London: Interface.

Foulkes, S. H. (1984) *Therapeutic group analysis*. London: Karnac Books.

Foulkes, S. H. (2003) *Group psychotherapy, The psychoanalytic approach*. London: Karnac Books.

Foulkes, S. H. (2005) *Introduction to group-analytic psychotherapy studies in the social integration of individuals and groups*. London: Karnac Books.

Fox, C. and Hawton, K. (2004) *Deliberate self-harm in adolescence*. London: Jessica Kingsley Publishers.

Fox, J. R. E. (2009) 'A qualitative investigation of the perception of emotion in anorexia nervosa: A basic emotion and developmental perspective'. *Clinical Psychology and Psychotherapy*, 16(4), pp. 328-336.

Fraiberg, S. (ed.) (1980) *Clinical Studies in Infant Mental Health*. London, Tavistock.

Fraiberg, S., Adelson, E. and Shapiro, V. (1975) 'Ghosts in the nursery: A psychoanalytic approach to the problem of impaired mother-infant relationships', *Journal of American Academy of Child Psychiatry*, 14(3), pp. 387-421.

Freud, A. (1935) *Psychoanalysis for teachers and parents*. Translated by Barbara Low. Boston: Beacon Press.

Freud, A. (1992) *The ego and the mechanisms of defence*. Revised. London: Karnac Books.

Freud, S. (1912) *Recommendations to physicians practising psychoanalysis*. Standard edition, 12. London: Hogarth Press.

Freud, S. (1915) *Introductory lectures on psychoanalysis*. Standard edition, 15. London: Hogarth Press.

Freud, S. (1917) *Beyond the pleasure principle*. Reprint, New York: Norton, 1998.

Freud, S. (1921) *Group psychology and the analysis of the ego*. Reprint, New York: Bantam Press, Reprinted 1960.

Frost, N. (2011). *Qualitative research methods in psychology: combining core approaches*. Maidenhead: McGrawHill/ Open University Press.

Garland, C. (1982) 'Group analysis: Taking the non-problem seriously', *Group Analysis*, 15(1) pp. 4-14.

Garland, C. (1998) *Understanding trauma: A psychoanalytic approach*. London, Duckworth.

Garland, C. (2002) *Action versus thought in post-traumatic states*. London: Tavistock Library Pamphlet.

Garland, C. (2010) *The groups book: Psychoanalytic group therapy - principles and practice*. London: Karnac Books.

Gaskell, C. (2009) "If the social worker had called at least it would show they cared". Young care leaders perspectives on the importance of care', *Children and Society*, 24(2), pp. 136-147.

Geddes, H. (2006) *Attachment in the classroom*. London. Worth Publishing.

George, C., Kaplan, N. and Main, M. B. (1984) *Adult attachment interview protocol*. Unpublished manuscript. University of California at Berkeley.

Glaser, B. G. (1978) *Theoretical sensitivity*. London: Sociology Press.

Glaser, B. G. (2003) *The grounded theory perspective II: Descriptions remodelling of grounded theory methodology*, Mill Valley, CA: Sociology Press.

Glaser, B. G. and Strauss, A. L. (1967) *Discovery of grounded theory*. Chicago: Aldine Press.

Glaser, D. (2000) 'Child abuse and neglect and the brain – a review', *Journal of Child Psychology and Psychiatry*, 41(1), pp. 97-116.

Golding, K. (2008) *Supporting children who are fostered or adopted*. London: Jessica Kingsley Publishers.

Goldstein, J., Freud, A. and Solnit, A. J. (1973) *Beyond the best interest of the child*, New York: Free Press.

Great Britain. Department for Education (2010) *Children's Act 1989: Care, planning, placement and case review*. [Online] Available at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/441643/Children\\_Act\\_Guidance\\_2014.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/441643/Children_Act_Guidance_2014.pdf) (Accessed 21 June 2014)

Great Britain. Department for Education (2013). *Department for Education Statistical First Release issued*, SFR 36/2013. [Online]. Available at: <https://www.gov.uk/government/organisations/department-for-education/about/statistics> (Accessed: 13 June 2014)

Great Britain. Department for Education, (2014) *Outcomes for children looked after by local authorities in England*, as at 31st March 2013. [Online]. Available at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/384781/Outcomes\\_SFR49\\_2014\\_Text.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/384781/Outcomes_SFR49_2014_Text.pdf) (Accessed 8 April 2013).

Great Britain. Department of Health (2008) *Health inequalities: Progress and next steps* [Online]. Available at:

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_085307](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_085307) (Accessed 18 June 2008).

Great Britain. Department of Health (2013), *Our children deserve better: prevention pays*. Annual report of the Chief Medical Officer 2012 [online]. Available at:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/255237/2901304\\_CMO\\_complete\\_low\\_res\\_accessible.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/255237/2901304_CMO_complete_low_res_accessible.pdf) (Accessed: 21 April 2014).

Great Britain. Ministry of Justice and Department of Education (2012). *The Government response to the family justice review: A system with children and families at its heart*. London: The Stationery Office Ltd. (Cm 8273).

Grunbaum, A. (1948) *The foundation of psychoanalysis*. Berkeley: University of California Press.

Guldner, C. and O'Connor, T. (1991) 'The ALF group: A model of group therapy with children'. *Journal of Group Psychotherapy, Psychodrama and Sociometry*, 43(4), p. 184.

Hall, J. (2009) 'Work in Progress – developing a flexible model of therapeutic observation of young mothers and their infants in care proceedings'. *Infant Observation*, 12(3), pp. 358-364.

Halton, W. (1994) 'Some unconscious aspects of organizational life: Contributions from psychoanalysis', in Obholzer, A. and Roberts, V. Z. (eds.) *The unconscious at work: Individual and organizational stress in the human services*. London: Routledge, pp. 11-19.

Hanko, G. (2002) 'Making psychodynamic insights accessible to teachers as an integral part of their professional task', *Psychodynamic Practice*, 8(3), pp. 375-389.

Haralambos, M. and Holborn, M. (2011) *Sociology Themes and Perspectives*. 7th edn. London: Harper Collins.

Harrison, T. (2000) *Bion, Rickman, Foulkes and the Northfield experiments: Advancing on a different front*. London: Jessica Kingsley Publishers.

Heinemann, P. (1950) 'On counter-transference', *International Journal of Psychoanalysis*, 33, pp. 81-84.

Hillen, T. and Gafson, L. (2013/2014) 'Statutory health assessments for preschool foster children fail to screen accurately for mental health disorders' in *Clinical Child Psychology and Psychiatry*, 19(2), pp. 313-327.

Hillen, T., Gafson L., Conlon, L. and Rosen, L. (2012) 'Assessing the prevalence of mental health disorders and needs among preschool children in care in England. An unmet need for greater care'. *Infant Mental Health Journal*, September issue.

Hindle, D. (1997) *Growing up in foster care*. A Tavistock Clinical Paper. London: Tavistock Library.

Hindle, D. (2000) *An intensive assessment of a small sample of siblings placed for adoption*. Unpublished PhD Thesis. University of East London.

Hindle, D. and Shulman, G. (2008) *The emotional experience of adoption: A psychoanalytic perspective*. London: Routledge.

Hindle, D. and Smith, M. V. (eds.) (2002) *Personality development: A psychoanalytic perspective*. London: Routledge.

Hindle, D. and Sherwin-White, S. (2014) (eds.) *Siblings matter: A psychoanalytic, developmental and systemic approach*. The Tavistock Clinic Series. London: Karnac Books.

Hobday, A. (2001) 'Timeholes: A useful metaphor when explaining unusual or bizarre behaviour in children who had moved families', *Clinical Child Psychology and Psychiatry*, 6(1), pp. 41-47.

Hodges, J. (1990) 'Rating manual for the 'Little pig' story stem assessment'. Unpublished manuscript, London: The Anna Freud Centre.

Hodges, J. and Steele, M. (1995) 'Internal representations of parent-child attachments in maltreated children', *New developments in attachment theory conference*. The Thomas Conran Foundation, London September.

Hodges, J and Steele, M. (2000) 'Effects of abuse on attachment representations: Narrative assessments of abused children', *Journal of Child Psychotherapy*, 26(3), pp. 433-455.

Hodges, J., Hillman S., Steele, M. and Henderson, K. (2002). '*Little pig' narrative story stem coding manual*'. Anna Freud Centre, Great Ormond Street, Coram Family Research.

Hodges, J., Steele, M., Hillman, S., Henderson, K. and Kaniuk, J. (2003) 'Changes in attachment representations over the first year of adoptive placement: Narratives of maltreated children'. *Clinical Child Psychology and Psychiatry*, 8(3) pp. 351 – 367.

Hollway, I. and Wheeler, S. (2010) *Qualitative research in nursing and health care*. 3rd ed. London: Wiley-Blackwell.

Hollway, W. (1991) *Work psychology and organizational behaviour: Managing the individual at work*. London: Sage Publishing.

Hollway, W. and Jefferson, T. (2000) *Doing qualitative research differently: Free association, narrative and the interview method*. London: Sage Publishing.



Hollway, W. and Jefferson, T. (2013) *Doing qualitative research differently: A psychosocial approach*. London: Sage Publishing.

Hopkins, J. (1986) 'Solving the mystery of monsters: Steps towards the recovery from trauma', *Journal of Child Psychotherapy*, 12(1), pp. 61-71.

Hopkins, J. (1987) 'Failure of the holding relationship: some effects of physical rejection on the child's attachment and on his inner experience', *Journal of Child Psychotherapy*, 13(1), pp. 5-17.

Hopkins, J. (1996) 'The dangers and deprivations of too good mothering', *Journal of Child Psychotherapy*, 22(3), pp. 407-422.

Hopkins, J. (2006) 'Individual psychotherapy for late-adopted children: How one new attachment can facilitate another' in Kenrick, J., Lindsey C. and Tollemache, L. (eds.) *Creating new families: Therapeutic approaches for fostering, adoption and kinship care*. London: Karnac Books.

Horowitz, L., Rosenberg, S. and Bartholomew, K. (1993) 'Interpersonal problems, attachment styles, and outcome in brief dynamic psychotherapy', *Journal of Consulting and Clinical Psychology*, 61(4), pp. 549-560.

Howitt, D. and Cramer, D. (2007) *Introduction to research methods in psychology*. 2nd Edn. Cambridge: Pearson Educational Limited.

Hoxter, S. (1990) 'Some feelings aroused in working with severely deprived children', in Boston, M. and Szur, R. (eds.) *Psychotherapy with severely deprived children*. London: Karnac Books, pp. 25-132.

Hoxter, S. (1999) 'Play and communication' in Boston, M. and Daws, D. (eds.) *The child psychotherapist and problems of young people*. London: Karnac Books, pp. 201-231.

Hunter, M. (2001) *Psychotherapy with young people in care: Lost and found*. East Sussex: Brunner-Routledge.

Hutchinson, S. A. and Wilson, H. S. (1992) 'Validity threats in semi-structured research interviews', *Nursing Research*, 41(2), pp. 117-119.

Ingham, G. (2004) *The revolt against mourning*. Unpublished paper.

Ironside, L. (2012) 'Training for foster carers', *Adoption and Fostering*, Summer 36(2), pp. 29-42.

Isaacs, S. (1948) 'On the nature of phantasy', *International Journal of Psychoanalysis*, 29, pp. 73-97.

Jackson, E. (2005) 'Developing observation skills in school settings: The importance and impact of "work discussion group" for staff', *Journal of Infant Observation*, 8(1), pp. 5-17.

James, C. (1981) 'W. R. Bion's contribution to the field of group therapy – An appreciation'. London: Tavistock Publications.

James, J. (2004) 'Commentary on "Group therapy with mothers and babies in postpartum crises: Preliminary evaluation of a pilot project"' *Group Analysis*, 37(1), pp. 151-159.

Johnston, B. (2008) *Discourse analysis*. 2nd edn. Malden: Blackwell Publishing.

Jorgensen, M. and Phillips, L. (2002) *Discourse analysis as theory and method*. London: Sage Publishing.

Joseph, B. (1998) 'Thinking about a playroom', *Journal of Child Psychotherapy*, 24(3), pp. 359-366.

Kennedy, E. and Midgley, N. (eds.) (2007) *Process and outcomes research in child and adolescent and parent-infant psychotherapy*. London: North Central London Strategic Health Authority.

Kenrick, J. (2004) 'Remembering and forgetting: Working with memories of trauma with fostered and adopted children', *Journal of Child Psychotherapy*, 3(3), pp. 356-368.

Kenrick, J. (2009) 'Concurrent planning 1: A retrospective study of continuities and discontinuities of care, and their impact on the development of infants and young children placed for adoption by the Coram Concurrent Planning Project', *Adoption and Fostering*, 33(4), pp. 5-18.

Kenrick, J. (2010a) 'Remembering and forgetting: Working with memories of trauma with fostered and adopted children', *Journal of infant, Child, and Adolescent Psychotherapy*, 3(3), pp. 356-368.

Kenrick, J. (2010b) 'Concurrent planning 2: The roller-coaster of uncertainty'. *Adoption and Fostering*, 34(2), pp. 38–47.

Kenrick, J. and Tollemache, L. (eds.) (2006) *Creating new families: Therapeutic approaches to fostering, adoption and kinship care*, London: Karnac Books.

King, M. and Trowell, J. (1992) *Children's welfare and the law: The limits of legal intervention*. London: Sage Publications.

Kirkpatrick, L. and Hazan, C. (1994) 'Attachment styles and close relationships: A four year prospective study', *Personal Relationships*, 1(2), pp. 123-142.

Klauber, J. (1968) 'On the dual use of historical and scientific method in psychoanalysis', *International Journal of Psychoanalysis*, 49(1), pp. 80-88.

Klauber, T. (2014) 'What Children need for optimal development: The gulf between evidence from psychoanalytic observation and the drivers for policy making in social care, education and child safeguarding', *Bulletin of the Association of Child Psychotherapists*, 252, pp. 4-8.

Klee, R. (1996) *Introduction to the philosophy of science: Cutting nature at its seams*. New York: Oxford University Press.

Klein, M. (1927) 'Symposium on child-analysis', in *Love, guilt and reparation and other works, 1921-1945*. London: Hogarth Press, 1975, pp. 152-184

Klein, M. (1935) 'A contribution to the psychogenesis of manic depressive states', in *Love, guilt and reparation and other works, 1921-1945*, New York: The Free Press, 1975, pp. 262-289.

Klein, M. (1940) 'Mourning and its relation to manic-depressive states', *The International Journal of Psychoanalysis*, 21, pp. 125-153.

Klein, M. (1940) 'Mourning and its relation to manic-depressive states', in *Love, guilt and reparation and other works, 1921-1945*, New York: The Free Press, 1975, pp. 344-369.

Klein, M. (1946) 'Notes on some schizoid mechanisms', in Klein, M., Heinmann, P., Isaacs, S. and Riviera, J. (eds.) *Developments in psychoanalysis by 1952*. London: Hogarth Press.

Klein, M. (1955) *The Psycho-Analysis of Children* London: Vintage.

Klein, M. (1957) 'Envy and Gratitude', in *Envy and gratitude and other works, 1946-1963: The writings of Melanie Klein*. Vol. III. London: Hogarth Press, 1975, pp. 176-235.

Klein, M. (1997) 'The psychological foundations in child analysis', in *The psychoanalysis of children*. New York: Delta, pp. 3-15.

Kobak, R. R. and Sceery, A. (1988) 'Attachment in late adolescence: Working models, affect regulation and representations of self and others', *Child Development*, 59(1), pp. 135-1.

Kobak, R. R. and Hazan, C. (1991) 'Attachment in marriage: Effects of security and accuracy of working models', *Journal of Personality and Social Psychology*, 60(6), pp. 861-869.

Kobak, R., Cole, H., Ferenz-Gillies, R. and Fleming, W. (1993) 'Attachment and emotional regulation during mother-teen problem solving: A control theory analysis', *Child Development*, 64(1), pp. 231-245.

Lacan, J. (1977) *Ecrits*. London: Tavistock Publications.

Landsberger, H. A. (1958) *Hawthorne Revisited*. New York: Ithaca Press.

Lanyado, M. (2003) 'The emotional tasks of moving from fostering to adoption: transition, attachment, separation and loss', *Clinical Child Psychology and Psychiatry*, 18(3), pp. 337-349.

Latour, B. and Woolgar, S. (1986) '*Laboratory life: the construction of scientific facts*' Princeton: Princeton University Press.

Lazar, A. (1991) 'Faculty, practitioner, and student attitudes toward research', *Journal of Social Work Education*, 27(1), pp. 34-40.

Lazar, R. A., Ropke, C. and Ermann, G. (1998) 'Learning to be: On the observation of a premature baby', *International Journal of Infant Observation and its Applications*, 2(1), pp. 21-39.

Lemming, H. (2003) *The Victoria Climbié Inquiry: Report of an Inquiry by Lord Lemming*. London: The Stationery Office.

Levene, L. V., Tuber, B., Slade, A. and Ward, M. J. (1991) 'Mothers' mental representations and their relationship to mother-infant attachment', *Bulletin of the Menninger Clinic*, 55(4), pp. 454-469.

Lynch, M. (2000) 'The role of the body as the medium in child psychotherapy', *Journal of Psychotherapy*, 26(2), pp. 159-187.

Mackay, N. (1981) 'The Kleinian expansion of Freudian metapsychology', *International Journal of Psychoanalysis*, 62, pp. 177-185.

Madill, A. (2006) *Exploring psychotherapy with discourse analysis: Chipping away at psychologists: Introduction through empirical studies*. London: Elsevier.

Maiello, S. (2000) 'Broken links: Attack or breakdown? Notes on the origins of violence', *Journal of Child Psychotherapy*, 26(1), pp. 5-24.

Main, M. (1981) 'Avoidance in the service of proximity: A working paper', in Immelmann, K., Barlow, G., Petrinovitch, L. and Main, M. (eds.) *Behavioral development: The Bielefeld interdisciplinary project*. New York: Cambridge University Press, pp. 651-693.

Main, M. (1991) 'Metacognitive knowledge, metacognitive monitoring, and singular (coherent) versus multiple (incoherent) models of attachment: Findings and directions for future research', in Marris, P., Stevenson-Hinde, J. and Parkes, C. (eds.) *Attachment across the life cycle*. New York: Routledge, pp. 127-159.

Main, M. and Goldwyn, R. (1984) 'Predicting rejection of her infant from mother's representation of her own experience: Implications for the abused-abuser intergenerational cycle', *Child Abuse and Neglect*, 8(2), pp. 203-217.

Main, M., Kaplan, N. and Cassidy, J. (1985) 'Security of infancy, childhood, and adulthood: A move to the level of representation', in Bretherton I. and Waters, E. (eds.) *Growing points of attachment theory and research*. Chicago: University of Chicago Press, pp. 66-106.

Main, M. and Cassidy, J. (1988) 'Categories of response to reunion with the parent at age six: Predictable from infant attachment classifications and stable over a one-month period', *Developmental Psychology*, 24(3), pp. 415-426.

Main, M. and Hesse, E. (1990) 'Parents' unresolved traumatic experiences are related to infant disorganised attachment status: Is frightened and/or frightening parental behaviour the linking mechanism?', in Greenberg, M. T., Cicchetti, D. and Cummings, E. M. (eds.) *Attachment in preschool years: Theory, research and intervention*. Chicago: University of Chicago Press, pp. 161-185.

Main, M. and Soloman, J. (1990) 'Procedures for identifying infants as disorganised and disorientated during the Ainsworth strange situation test', in Greenberg, M. T., Cicchetti, D. and Cummings, E. M. (eds.), *Attachment in preschool years: Theory, research and intervention*. Chicago: University of Chicago Press, pp. 121-161.

Manchester City Council (Figures) Public Intelligence Population Publications (2014).

Mawson, C. (1999) 'Containing anxiety in work with damaged children', in Obholzer, A. and Roberts, V. Z. (eds.) *The unconscious at work*. East Sussex: Routledge.

Mayo, E. (1949) *Hawthorne and the Western Electric Company, the social problems of an industrial civilization*. London: Routledge.

McLoughlin, C. (2010) 'Concentric circles of containment: A psychodynamic contribution to working in pupil referral units', *Journal of Child Psychotherapy*, 36(3), pp. 225-239.

Meltzer, D. (1975) 'Dimensionality in Mental Functioning', in Meltzer, D., Bremner, J., Hoxter, S., Weddell, D. and Wittenberg, I. (eds.) *Explorations in autism: A psychoanalytic study*. New York: Karnac Books.

Meltzer, D. (1981a) 'The relation of splitting of attention to splitting of self and objects', *Contemporary Psychoanalysis*, 17(2), pp. 232-238.

Meltzer, D. (1981b) 'The Kleinian expansion of Freud metapsychology', *International Journal of Psycho-Analysis*, 62(2), pp. 177-185.

Meltzer, D. (1986) *Studies in extended metapsychology*. Perthshire: Clunie Press.

Menzies-Lythe, I. (1988) *Containing anxiety in institutions: Selected essays*. London: Free Association Books.

Midgley, N., Anderson, J., Grainger, E., Nesic-Vuskovic, T. and Urwin, C. (eds.) (2009) *Child psychotherapy and research; New approaches, emerging findings*. London: Routledge.

Midgeley, N. and Kennedy, E. (2011) 'Psychodynamic psychotherapy for children and adolescents: A critical review of the evidence base', *Journal of Child Psychotherapy*, 37(3), pp. 1-29.

Miller, L., Rustin, M., Rustin, M. and Shuttleworth, J. (1989) *Closely observed infants*. London: Duckworth.

Molnos, A. (1995) *A Question of Time: Essentials of Brief Dynamic Psychotherapy*. London: Karnac Books.



Moore, N. (2007) '(Re)Using qualitative data', *Sociological Research Online*, 13(3)1 [Online].

Available at: <http://www.socresonline.org.uk/12/3/1.html> (Accessed: 4 July 2014).

Moylan, D. (1999) 'The dangers of contagion: Projective identification processes in institutions', in Obholzer, A. and Roberts V. Z. (eds.) *The unconscious at work: Individual stress in the human services*. London: Routledge.

National Institute for Health and Care Excellence (NICE) (2013) 'NICE support for commissioning for the health and well-being of 'looked after children' and young people'. [Online]

Available at:

<http://www.nice.org.uk/guidance/qs31/resources/qs31-health-and-wellbeing-of-lookedafter-children-and-young-people-nice-support-for-commissioning2> (Accessed: 6 January 2014).

National Institute for Health and Care Excellence (NICE) (2015) *Children's attachment in children and young people who are adopted from care, in care or at high risk of going into care (Draft Consultation)*. [Online].

Available at:

<http://www.nice.org.uk/guidance/gid-cgwave0675/resources/childrens-attachment-draft-guideline-nice2> (Accessed: 5 June 2015), pp. 1-44.

Nesic, T. (2014) 'Thinking the unthinkable and seeing the invisible', *Association of Child Psychotherapists*, 253, pp. 4-11.

Novick, K. K. and Novick, J. (2005) *Working with parents makes therapy work*. Oxford: Jason Aronson.

NSPCC (2013; 2014) 'Children in need statistics. Latest statistics for children subject to child protection plans in England'.

Nutt, L. (2006) *The lives of foster carers: Private sacrifices, public restrictions*. London: Routledge.

Obholzer, A. (1999) 'Authority, power and leadership. Contributions from group relations training', in Obholzer, A. and Roberts, V. Z. (eds.) *The unconscious at work: Individual stress in the human services*. East Sussex: Routledge.

Ofsted (2012-2013) Looked after children annual report. Annual Performance Report, Children in need and 'looked after children', Children and Commissioning Services.

Ofsted Report (2014) 'Inspection of services for children in need of help and protection, children looked after and care leavers and Review of the effectiveness of the Local Safeguarding Children Board'.

Ogden, T. H. (2004) 'On holding and containing, being and dreaming', *International Journal of Psychoanalysis*, 85, pp.1349-1364.

Oke, N., Rostill-Brookes, H. and Larkin, M. (2012) 'Against the odds: Foster carers' perceptions of family, commitment and belonging in successful placements', *Clinical Child Psychology and Psychiatry*, 18(1), pp. 7-24.

Olsen, H. (1977) 'Observing intelligence in young children', *Child Study Journal*, 7(2), pp.

Omery, A. (1983) 'Phenomenology: A method for nursing research', *Advances in Nursing Science*. 5, pp. 49-63.

Orona, C. J. (1997) 'Temporality and identity loss to Alzheimer's disease' in Huberman, M. and Miles, M. B. (eds.) (2002) *The qualitative researcher's companion*. London: Sage Publications.

O'Shaughnessy, E. (1981) 'A commemorative essay on W. R. Bion's theory of thinking', *Journal of Child Psychotherapy*, 7(2), pp. 181-9.

Owen, C. and Statham, J. (2009) '*Disproportionality in Child Welfare: The presence of black and minority ethnic children within the "looked after" and "children in need" populations*', Report to DCSF. Available at: [http://www.researchgate.net/publication/237525911\\_Disproportionality\\_in\\_Child\\_Welfare\\_The\\_Prevalence\\_of\\_Black\\_and\\_Minority\\_Ethnic\\_Children\\_within\\_the\\_'Looked\\_After'\\_and\\_'Children\\_in\\_Need'\\_Populations\\_and\\_on\\_Child\\_Protection\\_Registers\\_in\\_England](http://www.researchgate.net/publication/237525911_Disproportionality_in_Child_Welfare_The_Prevalence_of_Black_and_Minority_Ethnic_Children_within_the_'Looked_After'_and_'Children_in_Need'_Populations_and_on_Child_Protection_Registers_in_England) (Accessed: 18 December 2014).

Pedrina, F. (2004) 'Group therapy with mothers and babies in postpartum crises: Preliminary evaluation of a pilot project', *Group Analysis*, 37(1), pp. 137-151.

Perakyla, A., Anataki, C., Vehvilainen, S. and Leudar, I. (2008) *Conversation analysis and psychotherapy*. Cambridge: Cambridge University Press.

Perry, B. D. (2002) 'Childhood experience and the expression of genetic potential: What childhood neglect tells us about nature and nurture'. *Brain and Mind*, 3(1), pp. 79-100.

Perry, B. D. (2006) *The boy who was raised as a dog*. Philadelphia: Basic Books.

Perry, B. D., Pollard, R. A., Blakely, T. L., Baker, W. L., Perry, W. L. and Vigilante, D. (1995) 'Childhood trauma, the neurobiology of adaption and "use dependent" development of the brain: how "states" become "traits"', *Infant Mental Health Journal*, 16(4), pp. 271-291.

Piaget, J. and Inhelder B. (1969) 'The psychology of the child'. New York: Basic Books.

Pickin, L., Brunsden, V. and Hill, R. (2011) 'Exploring the emotional experience of foster carers using the protovoice technique', *Adoption and Fostering*, 35(2), pp. 61-75.

Pithouse, A., Lowe, K. and Hill-Tout J. (2004) 'Foster carers who care for children with challenging behaviour: a total population study', *Adoption and Fostering*, 28(3), pp. 20-30.

Pollio, H. R. and Ursiak, M. J. (2006) 'A thematic analysis of written accounts: Thinking about thought', in Fischer, C. T. (ed.) *Qualitative research methods for psychologists: Introduction through empirical studies*. London: Elsevier.

Pugh, E. (1968) *Social work in child care*. London: Routledge and Kegan Paul.

Pynoos, R. S. and Nader, K. (1993) 'School disaster: Planning and initial interventions', *Journal of Social Behavior and Personality*, 8, pp. 299-320.

Pynoos, R. S. and Nader, K. (1993) 'Issues in the treatment of post-traumatic stress in adolescents', in Wilson, J. P. and Raphael, B. (eds.) *International handbook of traumatic stress syndromes*. New York: Plenum Press, pp. 539-549.

Quinton, D., Rushton A., Dance, C. and Mayes, D. (1997) 'Contact between children placed away from home and their birth parents: Research issues and evidence', *Clinical Child Psychology and Psychiatry*, 2(3), pp. 393-413.

Reid, M. (2003) 'Clinical research: The inner and outer world of the mother and her new baby – born in the shadow of death', *Journal of Child Psychotherapy*, 29(2), pp. 207-226.

Reid, S. (1987) 'The use of groups as therapeutic interventions', *Educational and Child Psychology*, 4(3-4), pp. 171-9.

Reid, S. (1991) 'Group-work with children in schools', in Fox, M. and Kennedy, E. (eds.) *Proceedings of the 1991 conference for educational psychologists in training*. London: Tavistock Publications.

Reid, S. (1997a) 'The generation of psychoanalytic knowledge: Sociological and clinical perspectives, Part 2. Projective identification: The other side of the equation'. *British Journal of Psychotherapy*, 13(4), pp. 542-554.

Reid, S. (1997b) *Developments in infant observation: The Tavistock model*. London: Routledge.

Reid, S. (1999) 'The group as a healing whole' in Lanyado, M. and Horne, A. (eds.) *The handbook of child and adolescent psychotherapy*. London: Routledge.

Reid, S. (2007) 'Notes on groups', *A presentation at the Tavistock Centre* London.

Rennie, D. L. (1998) 'Grounded theory methodology: The pressing need for a coherent logic of justification'. *Theory and Psychology*, 8, pp. 101-119.

Robertson, J. and Robertson J. (1968) 'Five Films'.

Robertson, J. and Robertson, J. (1971) 'Young children in brief separation. A fresh look', *The Psychoanalytic Study of the Child*, 26, pp. 264-315.

Rose, J. S. (1997) 'Distortions of time in the transference: Some clinical and theoretical implications', in Rose, J. S. (ed.) (2011) *Mapping psychic reality: Triangulation, communication and insight psychoanalytic idea*. London: Karnac Books.

Rosenberg, E. B. (1992) *The adoption lifecycle*. New York: The Free Press.

Rosenfeld, H. (1952) 'Notes on the psychoanalysis of the superego conflict of an acute schizophrenic patient', *International Journal of Psycho-Analysis*, 33(2), pp. 111-131.

Rosenfeld, H. (1964) 'On the psychopathology of narcissism: A clinical approach', *International Journal of Psycho-analysis*, pp. 132-137.

Rosenfeld, H. (1965) *Psychotic states: A practical approach*. London: Hogarth Press.

Rosenfeld, H. A. (1971) 'A clinical approach to the psychoanalytic theory of the life and death instincts: An investigation into the aggressive aspects of narcissism', *International Journal of Psycho-Analysis*, 52(2), pp. 169-178.

Rosenthal, L. (2005) 'Qualifications and tasks of the therapist in group therapy with children', *Modern Psychoanalysis*, 30(2), pp. 95-103.

Rushton, A. (2000) *Adoption as a placement choice: Arguments and evidence*. London: Institute of Psychiatry.

Rushton, A. (2004) 'A scoping and scanning review of research on the adoption of children placed from public care', *Clinical Child Psychology and Psychiatry*, 9(1), pp. 91-106.

Rushton, A. and Dance, C. (2004) The outcomes of late permanent placements: the adolescent years, *Adoption and Fostering*, 28(1), pp. 49-58.

Rustin, M., Williams, G. and Reid S. (2013) 'Developments in Infant Observation, the Tavistock model'. Ed. Reid, S. (1997) Routledge.

Rustin, M. E. (1991) 'The strengths of a practitioner's workshop as a new model in clinical research', in Szur, R. and Miller, S. (eds.) *Extending*

*horizons: Psychoanalytic psychotherapy with children, adolescents and families.* London: Karnac Books.

Rustin, M. E. (1999) 'Multiple families in mind', *Clinical Child Psychology and Psychiatry*, 4(1), pp. 51-62.

Rustin, M. E. (2005) 'Conceptual analysis of critical moments in Victoria Climbié's life', *Child and Family Social Work*, 10(1), pp. 11-20.

Rustin, M. E. (2007) 'John Bowlby at the Tavistock', *Attachment and Human Development*, 9(4), pp. 355-359.

Rustin, M. E. (2013) 'The early years of childhood: Psychoanalytic development theory according to Freud, Klein and Bion', *International Journal of Psychoanalysis*, 94(2), pp. 411-413.

Rustin, M. E. (2014) 'The Association of Child Psychotherapy Bulletin', p.4.

Rustin, M. J. (1991) *The good society and the inner world.* London: Verso.

Rustin, M. J. (1997) *Stakeholding and the public sector, stakeholder capitalism.* New York: St Martin's Press Inc.

Rustin, M. J. (2004) 'Rethinking audit and inspection', *Soundings*, 26. pp. 86-107.

Rustin, M. J. (2009) 'What do child psychotherapists know?' in Midgley, N., Anderson, J., Grainger, E., Nesic-Vuskovic, T. and Urwin, C. (eds.) *Child psychotherapy and research: New approaches, emerging findings.* Hove: Routledge.

Saltzberger-Wittenberger, I., Williams, G. and Osborne, E. (2004) *The emotional experience of learning and teaching.* London: Karnac Books.

Sandler, J. (ed.) (1988) *Projection, identification and projective identification*. New York: International University Press.

Segal, H. (1981) *The work of Hanna Segal*. New York, Jason Arenson.

Shuttleworth, J. (1983) 'I am bad, no good, can't think', in Boston, M. and Szur, R, (eds.) (1990) *Psychotherapy with severely deprived children*. London: Karnac Books.

Shuttleworth, J. (1989) 'Psychoanalytic theory and infant development', in Miller, L., Rustin, M., Rustin, M. and Shuttleworth, J. (eds.), *Closely observed infants*. London: Duckworth.

Sinclair, I., Wilson, K. and Gibbs, I. (2004) *Foster carers: Why they stay and why they leave*. London: Jessica Kingsley Publishers.

Sinclair, I., Baker, C., Wilson, K. and Gibbs, I. (2005) *Foster children: Where they go and how they get on*. London: Jessica Kingsley Publishers.

Sinclair, I., Wilson, K. and Gibbs, I. (2005) *Foster placements why they succeed and why they fail*. London: Jessica Kingsley Publishers.

Simonetta M., Adamo, G. and Rustin, M. (eds.) (2014) *Young child observation; A development in the theory and method of infant observation*. New York: Karnac Books.

Slavin, R. L. (2004) 'Operative group dynamics in school settings: Structuring to enhance educational, social and emotional progress, *Group*, 26(4), pp. 297- 308.

Smith, J. A. (1996) 'Beyond the divide between cognitive and discourse, using interpretive phenomenological analysis in health psychology'. *Psychology and Health*, 11(2), pp. 261–271.



Smith, J. A. and Osborn M. (2003) 'Interpretive phenomenological analysis', in Smith, J. A. (ed.) *Qualitative psychology: A practical guide to research methods*. London: Sage, pp. 51-80.

Smith, J. A. and Osborn, M. (2004) 'Interpretative phenomenological analysis' in Breakwell, G. M. (ed.) *Doing social psychology research*. Malden: Blackwell, pp. 229-254.

Smith, J. A. and Osborn, M. (2007) 'Interpretive phenomenological analysis', *The Oxford handbook of qualitative research*. Oxford: Oxford University Press.

Sorensen, P. B. (1997) 'Thoughts on the containing process', in Reid, S. (ed.) *Developments in infant observation: The Tavistock model*. London: Routledge, pp. 113-122.

Sorensen, P. B. (2000) 'Observation of transitional facilitating behaviour: Developments and theoretical implications', *International Journal of Infant Observation*, 3(2), pp. 46-54.

Sorenson, P. B. (2004) 'Primitive anxieties which interfere with attachment', *Infant Observation Journal*, 7(1), pp. 46-67.

Sorenson, P. B. (2005a) 'Transition facilitating behaviour: Bridging attachment theory and British object relations', *Journal of Infant, Child and Adolescent Psychotherapy*, 4(2), pp. 119-133.

Sorenson, P. B. (2005b) 'Changing positions helping parents look through the child's eyes', *Journal of Infant, Child and Adolescent Psychotherapy*, 31(2), pp. 153-168.

Stern, D. (1985) *The interpersonal world of the infant*. New York: Basic Books.

Stern, D. (1998) 'The process of therapeutic change involving implicit knowledge: some implications of development observations, for adult analysis', *Infant Mental Health Journal*, 19(3), pp. 300-308.

Strauss, A. L. (1987) *Qualitative analysis for social scientists*. New York: Cambridge University Press.

Steiner, J., Rosenfeld, H. A., O'Shaughnessy, E., Feldman, M., Segal, H., Steiner, R. and Britton R. (2008) *Rosenfeld in retrospect: Essays on his clinical influence*. London: Routledge.

Stern, D. (1985) *The interpersonal world of the infant*. New York: Basic Books.

Stern, D. (1998) 'The process of therapeutic change involving implicit knowledge: some implications of development observations, for adult analysis', *Infant Mental Health Journal*, 19(3), pp. 300-308.

Strauss, A. L. and Corbin J. M. (1990) *Basics of qualitative research, grounded theory: Procedures and techniques*. London: Sage Publications.

Strauss, A. L. and Corbin, J. M. (2008) *Basics of qualitative research*. London: Sage Publications.

Sutton, A. (1991) 'Deprivation entangled and disentangled', *Journal of Child Psychotherapy*, 17(1), pp. 61-77.

Target, M., Fonagy, P. and Shmuley-Goetz, Y. (2003) 'Attachment representation in school aged children: The development of the child attachment interview (CAI)', *Journal of Child Psychotherapy*, 29(2), pp. 171-186.

The Third Report from the Children, Schools and Family Committee, Session 2008-2009 Education Committee Contents.

Tod, R. J. N. (1968) *Children in care*. London: Longman Group Ltd.

Tomalski, P. and Johnson, M. H. (2010) 'The effects of early adversity on the adult and developing brain', *Current Opinion in Psychiatry*, 23(3), pp. 233-238.

Trowell, J. and Kolvin, I. (1999) 'Lessons from a psychotherapy outcome study with sexually abused girls', *Clinical Child Psychology and Psychiatry*, 4(1), pp. 70-89.

Trowell, J. and Thorpe, C. (2007) *Re-rooted lives: Interdisciplinary work within the family justice system*. 2nd edn. London: Jordon Publishing.

Trowell, J., Joffe, I., Campbell, J., Clemente, C., Almqvist, F., Soininen, M., Koskenranta-Aalto, U., Weintraub, S., Kolaitis, G., Tomaras, V., Anastasopoulos, D., Grayson, K., Barnes, J. and Tsiantis, J. (2007) 'Childhood depression: A place for psychotherapy. An outcome study comparing individual psychodynamic psychotherapy and family therapy', *European Child and Adolescent Psychiatry*, 16(3), pp. 157-167.

Turp, M. (2012) 'Clinging on for dear life: Adhesive identification and experience in the countertransference', *British Journal of Psychotherapy*, 28(1), pp. 66-80.

Twardosz, S. and Lutzer, J. (2010) 'Child maltreatment and the developing brain: A review of neuroscience perspectives', *Aggression and Violent Behavior*, 15(1), pp. 59-68.

Ursano, R. J., Sonnenberg, S. M. and Lazar, S. G. (1991) *Concise guide to psychodynamic psychotherapy*. Washington, D.C.: American Psychiatric Press.

Urwin, C. and Sternberg, J. (eds.) (2012) *Infant observation and research: Emotional processes in everyday lives*. Hove: Routledge.

Van Velsor, P. (2004) 'Training for successful group work with children: What and how to teach', *The Journal for Specialists in Group Work*, 29(1), pp. 137-146.

Vygotsky, L. (1962) *Thought and language*. Reprint, Cambridge, MA: MIT Press, 1934.

Vygotsky, L. (1978) *Mind in society: The development of higher psychological processes*. Cambridge, MA: Harvard University Press.

Vygotsky, L. (1987) 'Thought and speech' in Rieber, R. W. and Carton, A. S. (eds.) *Collected works of L. S. Vygotsky: Vol 1, Problems of general psychology*. New York: Plenum, pp. 167-241.

Wakelyn, J. (2008) 'Transitional psychotherapy for looked-after children in "short-term" foster care', *Journal of Social Work Practice*, 22(1), pp. 27-36.

Wakelyn, J. (2010) *What can be learned from a therapeutic observation of an infant or young child in foster care?*. Unpublished PhD thesis, University of East London/Tavistock Centre.

Wakelyn, J. (2011) 'Therapeutic observation of an infant in foster care', *Journal of Child Psychotherapy*, 37(3), pp. 280-310.

Wakelyn, J. (2012) 'Observation as a therapeutic intervention for infants and young children in care', *Infant Observation*, 15(1), pp. 49-66.

Walker S., Read, S. and Priest H. (2013) 'Use of reflectivity in a research methods study', *Nurse Researcher*, 20(3), pp. 38-43.

Wall, N. (2012) cited in Brown R. and Ward, H. (2012) *Decision-making within a child's timeframe: An overview of current research evidence for family justice professionals concerning child development and the impact of maltreatment*, Working Paper 16. London: Department of Education.

Wallerstein, R. S. (1971) 'Issues in research in psychoanalysis', *International Journal of Psycho-Analysis*, 52, pp. 11-50.

Wallerstein, R. S. (1996) 'Psychoanalysis as science: Challenges to the data of psychoanalysis', in Miller, N., Luborsky, L., Barber, J. and Doherty, J. (eds.) *Psychodynamic treatment research*. New York: Basic Books.

Ward, H., Munro, E. and Dearden, C. (2006) *Babies and young children in care: Life, pathways, decision-making and practice*. London: Jessica Kingsley Publishing.

Watson, A. and Jones, D. (2002) 'The impact of fostering on foster carers own children', *Adoption and Fostering*, 26(1), pp. 49-55.

Weber, M. (1949) *The methodology of the social sciences*. Translated by Shils, E. A. and Finch, A. F. (eds.). Reprint. Brunswick: Free Press, 2011.

Wetherell, M., Taylor, S. and Yates, S. (2001) *Discourse theory and practice: A reader*. London: Sage Publishing.

White, F. A., Hayes, B. and Livesey D. (2013) *Developmental psychology: From infancy to adulthood*. Sydney: Pearson

Williams, A. H. (1998) *Cruelty, violence and murder, understanding the criminal mind*. London: Karnac Books.

Williams, G. (1997a) *Internal landscapes and foreign bodies: Eating disorders and other pathologies*. London: Karnac Books.

Williams, G. (1997b) 'Thinking and learning in deprived children', in *Internal landscapes and foreign bodies: Eating disorders and other pathologies*. London: Karnac Books.

Williams, G. (1983) “‘I’m bad, no good, can’t think’”, in Boston, M. and Szur, R. (eds.) *Psychotherapy with severely deprived children*. London: Karnac Books.

Wilson, H. S. and Hutchinson, S. A. (1991) *Science of Caring*, Vol. 3.

Wilson, H. S. and Hutchinson, S. A. (1996) ‘Methodological mistakes in grounded theory’, *Nursing Research*, 45(2), pp. 122-124.

Winnicott, D. W. (1949) ‘Hate in the counter-transference’, *International Journal of Psychoanalysis*, 30, pp. 69-74.

Winnicott, D. W. (1953) ‘Transitional aspects and transitional phenomena: A study of not-me possession’, *International Journal of Psycho-Analysis*, 34(2), pp. 89-97.

Winnicott, D. W. (1956) ‘Primary maternal preoccupation’, in *Collected papers: Through paediatrics to psychoanalysis*. Reprint, London: Tavistock Publications, 1958, pp. 300-305.

Winnicott, D. W. (1958) *Collected papers: Through paediatrics to psychoanalysis*. London: Tavistock Publications.

Winnicott, D. W. (1960) ‘The theory of the parent-infant relationship’, *International Journal of Psychoanalysis*, 41, pp. 585-595.

Winnicott, D. W. (1963) ‘Dependence in infant care, in child care, and in the psychoanalytic setting’, *International Journal of Psychoanalysis*, 44, pp. 339–344.

Winnicott, D. W. (1964) ‘The child, the family and the outside world’. Harmondsworth: Penguin Books.

Winnicott, D. W. (1965) *The maturational-process and the facilitating environment*. New York: International Universities Press.

Winnicott, D. W. (1965a) 'Group influences and the maladjusted child, The school aspects', in *The maturational processes and the facilitating environment*. London: Hogarth Press.

Winnicott, D. W. (1965b) 'The capacity to be alone', in *The maturational process and the facilitating environment*. London: Karnac Books.

Winnicott, D. W. (1965c) 'Ego Integration', in *The maturational process and the facilitating environment*. London: Karnac Books.

Winnicott, D. W. (1971) 'Mirror-role of mother and family in child development', in *Playing and reality*. London: Tavistock Publications.

Winnicott, D. W. (1987) *The spontaneous gesture: selected letters of D. W. Winnicott*. London: Karnac Books pp. 38-43.

Winnicott, D. W. (2012) *Deprivation and delinquency*. London: Routledge.

Wittenberg, I. C. (1999) 'What is psychoanalytic about the model of studying infants? Does it contribute to psychoanalytic knowledge?', *Infant Observation*, 2(3), pp. 4-15.

Wittenberg, I. C. (2013) *Experiencing endings and beginnings*. London: Karnac Books.

Woods, J. (1993) 'Limits and structure in child group psychotherapy', *Journal of Child Psychotherapy*, 19(1), pp. 63-78.

Woods, J. H. (1993) 'Affective learning: One door to critical thinking', *Holistic Nursing Practice*, 7(3), pp. 64-70.

Youell, B. (2005) 'Observation in social work practice', in Bower, M. (ed.) *Psychoanalytic theory for social work practice*. Abingdon: Routledge, pp. 47-59.

Youell, B. (2014) 'Separation difficulties or transition? The value of observation in work with very young children and their parents', *Infant Observation*, 17(2), pp. 115-125.

Youell, B. and Canham, H. (2006) *The learning relationship: Psychoanalytic thinking in education*. London: Karnac Books.



## **8. Appendices**

### **Appendix A**

#### **Looking at Local Figures for the Large Northern City in which the Research Project is Set**

The Children's Services of this Northern city agreed to compile, at the researcher's request, a number of statistics that looked specifically at the under-fives care population, tracking their reception care and placement moves. This, along with the collection of statistics from CAMHS-LAC, was an attempt to look at the general backgrounds of children in the care system, aged from birth to five in order to set a context for the children in the Children's Psychotherapy Group (who were all aged between four and seven and had all spent over two years in the care system). The Children's Services Information Department had planned to gather this information from raw data (they did not routinely collect this information, although they have recently introduced an initiative in order to be able to do this). However, the arrival of Ofsted interrupted this process. Hopefully both these sources of statistics could be used to track emerging patterns in relation to young 'looked after children' in the city.

This Northern city provided a whole range of figures for Ofsted. These figures compared this City's performance with national figures and figures for neighbouring authorities.

For example, according to Ofsted (2014), in June 2014 there were 1,406 children in the care of this large Northern city (328 per 10,000 children), 1,025 of these children were living in foster families. 61% were living out of the authority area (Ofsted, 2014).

Between March 2013 and March 2014 there were 63 adoptions and 24 children became the subject of special guardianship orders. This indicated

that the majority of children were in short or long-term foster placements. The permanency plan changed the original plan of adoption for 16% of the children. This was considerably higher than their statistical neighbours and indicates that some children had waited too long for a permanent solution.

The time taken from a child being received into care in this Northern city to being placed for adoption in current published data was higher than their statistical neighbours at 740 days. This means that children in the city waited 203 days longer than the government threshold to be adopted (local authority 2013-14 data) and 56 days more than their statistical neighbours (2012-13 data). More recent unpublished and unvalidated data collated by the authority indicated recent improvements. Performance was improving as a result of swifter processing of care proceedings following the implementation of the Family Justice Review reforms.

A low number of black minority ethnic children were placed for adoption in comparison with their statistical neighbours. Renewed focus on this group had found some new adopters, and this has helped improve performance, with a rise from 16 children successfully placed in 2013 to 23 in 2014.

The 2013-14 Annual Adoption Report noted that black minority ethnic children waited much longer to be placed, even if they were very young (under 2). The 2012-13 adoption data-set for the Northern city indicated that while there were 47 black minority ethnic children waiting to be adopted, there were only 9 black minority ethnic adopters available.

13% of children in this city had three or more placements during the year ending 31 March 2013. This meant that this City's performance was now worse than both the national and their statistical neighbours' averages and that it is ranked 107 of 149 local authorities.

Of the children who had been looked after for more than two and a half years, 63% of those had been in the same placement for at least two years

or placed for adoption. 10% of children ceasing to be looked after during the year were adopted. 11% ceased to be looked after because of a special guardianship order.

Whilst being in placement for two and a half years might be an indication of stability of placement, it can also (as is the case with a number of children in the Children's Psychotherapy Group) be an indication of drift in the professional networks supporting the child and their foster carer(s).

Drift can occur in different sections of the professional network. The drift in the legal system has greatly increased and has been the source of government concern (Brown and Ward (2012); Rushton (2000; 2004). Research looking at the time that children in the UK await final decisions about their care indicates that this rose from an average of 24 weeks in 1993 to an average of 47 weeks in 2001 (Wakelyn, 2011). 1 in 10 cases take over 2 years to be resolved (Beckett and McKeigue, 2003). These extended proceedings resulted in a confusion of what is often purported to be 'short-term' foster care.

## Appendix B

Over the course of this research project, numerous searches of the literature were undertaken of the emotional experience of foster carers and children's psychotherapy groups. For both, different databases were searched and results were examined, abstracts were read and where appropriate full texts. This led to a continuous refining of the focus of the literature review.

In the case of foster carers the focus was on the emotional experience of fostering and the impact of parenting children traumatised in early infancy. A similar process was followed in regard to children's psychotherapy groups. The focus of the literature review in relation to children's psychotherapy groups was on key psychoanalytic concepts usefully employed with these groups, the role of co-leaders and the experience and management of loss to identify just a few. Only the literature directly related to the research of children's psychotherapy groups has been included in the literature review. There are many recent and important international papers on children's psychotherapy groups, particularly from North and South America but these were difficult to locate in the context of this research project.

Below are examples of these searches:

### Search History

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1. PsycInfo; "foster carer\*".ti,ab; 209 results.
  2. PsycInfo; "foster parents".ti,ab; 809 results.
  3. PsycInfo; 1 OR 2; 164 results.
  4. PsycInfo; "Emotional" [Expanded: Emotional experience, emotional recognition, emotional development, emotional disturbances, emotional immaturity, emotional regulation, emotions, expressed emotions].ti,ab; 85,642 results.
  5. PsycInfo; "Emotional experience".ti,ab; 3316 results.
  6. PsycInfo; 4 OR 5; 87, 412 results.
  7. PsycInfo; 3 AND 6; 224 results.
-

1. PsycInfo; "children's psychotherapy group\*".ti,ab; 7 results.
2. PsycInfo; "children's psychoanaly\* group\*".ti,ab; 0 results.
3. PsycInfo; "children's psychodynamic psychotherapy group\*".ti,ab; 0 results.
4. PsycInfo; "children's psychodynamic group\*".ti,ab; 0 results.
5. PsycInfo; "child\* group psychotherapy".ti,ab; 15 results.
6. PsycInfo; "psychotherapy group\*".ti,ab; 1059 results.
7. PsycInfo; "psychoanalytic psychotherapy group\*".ti,ab; 11 results.
8. PsycInfo; "psychodynamic psychotherapy group\*".ti,ab; 23 results.
9. PsycInfo; 5 OR 6 OR 7; 1059 results.
10. PsycInfo; 8 [Limit to: (Age group Childhood birth-12 Yrs or Preschool Age 2-5 Yrs or School Age 6-12 Yrs)]; 72 results.

- 
11. EMBASE; "children's psychotherapy group\*".ti,ab; 3 results.
  12. EMBASE; "children's psychoanaly\* group\*".ti,ab; 0 results.
  13. EMBASE; "children's psychodynamic psychotherapy group\*".ti,ab; 0 results.
  14. EMBASE; "children's psychodynamic group\*".ti,ab; 0 results.
  15. EMBASE; "psychotherapy group\*".ti,ab; 431 results.
  16. EMBASE; "psychoanalytic psychotherapy group\*".ti,ab; 5 results.
  17. EMBASE; "psychodynamic psychotherapy group\*".ti,ab; 9 results.
  18. EMBASE; 15 OR 16 OR 17; 431 results.
  19. EMBASE; 18 [Limit to: (Age group Childhood birth-12 Yrs or Preschool Age 2-5 Yrs or School Age 6-12 Yrs)]; 0 results.
  20. EMBASE; "child\* group psychotherapy".ti,ab; 3 results.
  21. EMBASE; 18 [Limit to: (Human Age Groups Preschool Child 1 to 6 years or School Child 7 to 12 years)]; 6 results.

### Examples:

<b>Search Results for EMBASE; 18 [Limit to: (Human Age Groups Preschool Child 1 to 6 years or School Child 7 to 12 years)]; 6 results.</b>
1. The impact of group psychotherapy on social development in children with pervasive developmental disorders
2. Group psychotherapy for adolescent survivors of homicide victims: A pilot study
3. A long-term psychotherapy group for children with chronic medical illness
4. Group dynamics in a painting workshop for
5. Group psychotherapy with children: A new instrument for measurement of results [Spanish] Psicoterapia grupal en la infancia: Aporte de un instrumento de evaluacion
6. Dominance hierarchies in psychotherapy groups

## **1. The impact of group psychotherapy on social development in children with pervasive developmental disorders**

**Citation:** International journal of group psychotherapy, July 2008, vol./is. 58/3(363-379), 0020-7284 (Jul 2008)

**Author(s):** Tyminski R.F.; Moore P.J.

**Language:** English

**Abstract:** Thirty-nine children with a diagnosed pervasive developmental disorder (PDD) participated in homogeneous psychotherapy groups. Their social development was assessed at home and at school both before and after treatment. Significant improvements in social functioning were observed in both settings, and these gains were not attributable to demographic variables or cognitive development. This research provides psychometric validation for the Vineland Adaptive Behavior Scale (VABS; Sparrow, Balla, & Cicchetti, 1984) and the Tyminski Social Skills Checklist (SSC), a new index designed to assess children's social functioning in educational settings. The results suggest that group therapy may be an important modality for better understanding and developing crucial social skills among the growing number of children diagnosed with a pervasive developmental disorder.

**Publication Type:** Journal: Article

**Source:** EMBASE

**Full Text:** Available from ProQuest in [International Journal of Group Psychotherapy](#)

## **2. Group psychotherapy for adolescent survivors of homicide victims: A pilot study**

**Citation:** Journal of the American Academy of Child and Adolescent Psychiatry, 2001, vol./is. 40/11(1261-1267), 0890-8567 (2001)

**Author(s):** Salloum A.; Avery L.; McClain R.P.

**Language:** English

**Abstract:** Objective: To conduct an exploratory study designed to evaluate the effectiveness of a time-limited psychotherapy group model to decrease traumatic symptoms among adolescent survivors of homicide victims. Method: Forty-five inner-city adolescents between the ages of 11 and 19 years participated in community-based, time-limited therapy groups that were specifically designed for youths who had a loved one die because of violence. The therapy groups were based on a 10-week treatment model for adolescent survivors of homicide victims with the goals of providing grief education, facilitating thoughts and feelings about grief, and reducing traumatic symptoms. Results: On completion of group therapy, the adolescent participants reported an overall significant decrease in traumatic symptoms on an index of posttraumatic stress, especially in the areas of reexperiencing and avoidance symptoms. The mean difference between pre- and posttest was a 10.03 decrease in the sum of the Child PTSD Reaction Index scores (sig = .001). Conclusion: The results of this pilot study indicate that group therapy may be helpful in reducing PTSD

symptoms among inner-city, African-American adolescent survivors of homicide victims. Although validity is limited by the lack of a comparison group, the authors suggest that such a brief trauma/grief psychotherapy group may be applicable for suburban and rural adolescent survivors of homicide victims as well.

**Publication Type:** Journal: Article

**Source:** EMBASE

### **3. A long-term psychotherapy group for children with chronic medical illness**

**Citation:** Bulletin of the Menninger Clinic, December 1998, vol./is. 62/1(15-32), 0025-9284 (Winter 1998)

**Author(s):** Stauffer M.H.

**Language:** English

**Abstract:** Group psychotherapy for children with chronic medical illness can be a powerful tool in facilitating their social and emotional adjustment to their condition. In this article, the author addresses the theoretical issues in developing and managing such a group, drawing on his experience with a long-term psychotherapy group of four children of varying ages and medical conditions. Themes arising from this group included universality of experience, understanding the disabilities of others, sharing, relationships with parents, and grief and loss. In addition to addressing developmental tasks of individual group members, the author presents therapist-related issues (e.g., transference, countertransference, the cotherapy relationship, and the therapist-parent relationship). The author concludes that participation in an ongoing psychotherapy group can provide medically ill children with considerable opportunity for growth, understanding, meaning, and adaptation.

**Publication Type:** Journal: Review

**Source:** EMBASE

**Full Text:** Available from EBSCOhost in [Bulletin of the Menninger Clinic](#)

Available from EBSCOhost in [Bulletin of the Menninger Clinic](#)

Available from EBSCOhost in [Bulletin of the Menninger Clinic](#)

### **4. Group dynamics in a painting workshop for children**

**Citation:** Group Analysis, 1996, vol./is. 29/4(491-501), 0533-3164 (1996)

**Author(s):** Magagnini L.; Facci L.; Vitrano A.; Charkham D.M.

**Language:** English

**Abstract:** The authors describe an analytical psychotherapy group for children, making use of a 'painting workshop' technique derived from teaching practice. This technique facilitates children's recognition of emotion hitherto frozen and repressed behind a false Self and allows expression and communication.

**Publication Type:** Journal: Article

**Source:** EMBASE

**5. Group psychotherapy with children: A new instrument for measurement of results [Spanish] Psicoterapia grupal en la infancia: Aporte de un instrumento de evaluacion**

**Citation:** Psiquis, 1996, vol./is. 17/9(41-50), 0210-8348 (1996)

**Author(s):** Groch J.E.; Pena I.; Pedreira J.L.

**Language:** Spanish

**Abstract:** We remark on the technique used in children's psychotherapy groups putting the different criterions together cause under our point of view they are complementary. Taking into account the shortage of instruments for the evaluation of treatment results, we have considered the Karolinska Psychodynamic Profile - KAPP - (Weinryb et al. 1991), which we adapted to the child. Such adaptation helps on instruments of clinical valuation and investigation about the cases discussed and, adding, is powerfully useful for teaching purposes.

**Publication Type:** Journal: Article

**Source:** EMBASE

**6. Dominance hierarchies in psychotherapy groups**

**Citation:** The British journal of psychiatry : the journal of mental science, June 1986, vol./is. 148/(625-631), 0007-1250 (Jun 1986)

**Author(s):** Kennedy J.L.; MacKenzie K.R.

**Language:** English

**Publication Type:** Journal: Article

**Source:** EMBASE

**Full Text:** Available from *Free Access Content* in [British Journal of Psychiatry, The](#)



**Search results for 5. PsycInfo; "child\* group psychotherapy".ti,ab; AND 8. PsycInfo; "psychodynamic psychotherapy group\*".ti,ab; 23 results.**

1. 'Tied together feelings'. Group psychotherapy with latency children: The process of forming a cohesive group.

2. The impact of group psychotherapy on social development in children with pervasive development disorders.

3. Group dynamics in a painting workshop for children. (Trans D. M. Charkham)

4. A long-term psychotherapy group for children with chronic medical illness.

5. Peer culture and the organization of self and object representations in children's psychotherapy groups.

6. Group psychotherapy as a technique for assisting ego-impaired children and adolescents.

7. A world between realities: An exploration of therapeutic group culture and transitional phenomena in a long-term psychotherapy group.

8. 'Make sure you keep our house safe!' Thematic analysis of a children's psychotherapy group.

9. A treatment outcome study of bereavement groups for children.

10. Long-Term Group Psychotherapy for Children with Pervasive Developmental Disorders: Evidence for Group Development.

11. Structured psychotherapy groups for sexually abused children and adolescents.

12. The group as transitional object: Reflections on the treatment process in a long-term psychotherapy group for unmarried teenage mothers and their infants or toddlers

13. Group psychotherapy for children of fathers with PTSD: Evidence of psychopathology emerging in the group process

14. Group Psychotherapy with Children on an Inpatient Unit: The MEGA Group Model

15. Examining roles in children's group therapy: The development of a dramaturgical role instrument to measure group process

16. Therapy and interventions research with children and adolescents [with vignette by Anne K. Jacobs].

17. Complementary cultures in children's psychotherapy groups: Conflict, coexistence, and convergence in group development.

18. The therapist's use of self and cultures in children's psychotherapy groups.

19. Action, enactment and moments of meeting in therapy with children.
20. How does group process research inform leaders of counseling and psychotherapy groups?
21. Mother-infant psychotherapy: Integrating techniques of group, family, and individual therapy.
22. Rêves, jeux et groupes: Que fait l'analyste dans un groupe d'enfants?
23. Mother-infant group psychotherapy as an intensive treatment in early interaction among mothers with substance abuse problems.
24. "Passing through life": Alexithymia and attachment disorders.
25. Applications of child group psychotherapy.
26. Un cadre thérapeutique pour les autistes et leurs parents comme support d'identifications et
27. Child group psychotherapy in the school at the threshold of a new millennium.
28. Supervision and staff training for children's group psychotherapy: General principles and applications with cumulatively traumatized, inner-city children.
29. Review of Conversation analysis and psychotherapy.
30. Limits and structure in child group psychotherapy.
31. Group Therapy With Children.
32. Psicoterapia de grupos infantiles: selección de pacientes para grupos, técnica de tratamiento y evaluación de resultados.
33. Innovative and creative approaches in child group psychotherapy.
34. Countertransference: In and beyond child group psychotherapy.
35. Child group psychotherapy: Future tense.
36. Child group psychotherapy in special settings.
37. Zkušenosti s dětskou skupinovou psychoterapií v pedopsychiatrické ambulanci.
38. Problems and approaches in child group psychotherapy in a public school milieu.



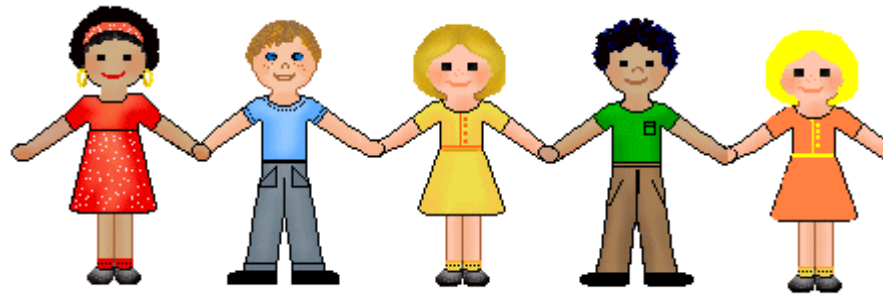
## **Appendix C**

### **Trust Logo**

### **Address and Contact Details**

### **Information Sheet for Children**

#### **Being part of a children's psychotherapy group**



#### **Whose idea is it that I be part of a children's group?**

I have spoken to (Name of Child's Social Worker) and (Name of Child's Foster Carer) about a group that I would like you to be part of and they think that this is a good idea.

#### **What is the group for?**

The group is a place to think about change and "coming together and separating." We will talk about this in the group.

#### **When will the group take place?**

The group will take place on Tuesday afternoons. It will start at one o'clock and finish at quarter past two at the (Clinic Name). (Name of foster carer) will bring you and take you home afterwards. There will be toys to play with and you will get to meet other children.

**Who will be in the group?**

There will be five children in the group, (two boys and three girls) you and four other children and (Name of Group Leaders).

**What will happen to me in the group?**

(Foster carer's name) will take you down to the group room. You will meet other children and be able to play. (Foster carer's name) will come to the room to collect you at the end of the group.

**When will the group end?**

The group will last for ten weeks. There will be a calendar to help you count the weeks.

**What happens at the end of the group?**

(Names of Group Leaders) will talk to you and (name of foster carer and social worker) about how to help you after the group.

**Christine Chester**

**Child and Adolescent Psychotherapist**

**Consultation and Therapeutic Services for 'looked after children'**

## TRUST LOGO

### Child's Consent Form

#### Children's Psychotherapy Group

Name of Clinician: Christine Chester

Name of Child:

1. The details of the group have been explained to me and I would like to attend.

Initial Box Please



2. I understand that my being a part of the group may be used to help other children and their parents or foster carers.

Initial Box Please



Name of child

Date

Signature

Name of clinician

Date

Signature

Children's Consent Form Version 1 13<sup>th</sup> August 2009

Copy for file, Copy for Child and Foster Carer and Copy for Social Worker.

## Appendix C

### TRUST LOGO

#### Information Sheet for Foster Carers

I have been doing a Clinical Doctorate at the Northern School of Child and Adolescent Psychotherapy in partnership with the Tavistock and Portman NHS Foundation Trust in London, which is a national centre for the training of child and adolescent mental health professionals and also a major provider of mental health services. As part of that course, linked to the University of East London (UEL), I am now writing a research thesis on supporting foster carers in helping young, 'looked after children' manage change and their anxieties and difficulties in making new relationships.

As part of this I would like to research what can be learned from my work with .....(name of child).....and share this thinking with other professionals so that they can use what has been learned to help other children and young people in the future. Doing research like this is an important way of developing and improving our understanding about the help we can offer children and young people with the difficulties they and their foster carers encounter.

You do not have to agree if you do not want to. Whether or not you do will make no difference to any further treatment that ....(name of child)... may receive in the future, nor will ...name of child.... or you benefit in any way if you do agree.

I will change names and other details so that no-one will be able to recognise ...(name of child).... or your family.

If you wish, I will provide you with the factual statements I make about ...name of child.... and with information about the way I have changed his/her details.

The completed dissertation will be lodged in the Tavistock library, as would any subsequent publication based on it. If when ...name of child... is old

enough, (s)he is interested in seeing what has been written (s)he will need to contact the Organising Tutor of the Clinical Doctorate in Child and Adolescent Psychotherapy at the Tavistock clinic who will put you in touch with me. This is also the person you should contact should you wish to make a complaint about this process.

**Information Sheet for Foster Carers Shortened Version**  
**Version 1 -13<sup>th</sup> August 2009**



**TRUST LOGO**

**Consent Form for Foster Carers**

**Centre: The Clinical Setting**

**Study Number: 09/111008/113**

**Title of Project: Children's Psychotherapy Groups for 'looked after children'**

**Name of Researcher: Christine Chester**

1. I confirm that I have read and understand the information sheet dated 16<sup>th</sup> October (version 2) about the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

**Please Initial Box**

2. I understand that my participation in the study is voluntary and that I am free to withdraw it at any time without giving a reason, and without the input I receive from CT-LAC [(Consultation and Therapeutic Services for 'looked after children') – the children's psychotherapy group, the foster carers support group or future work] or my legal rights being affected.

**Please Initial Box**

3. I agree to the three interviews that are my contribution to the research project being audio recorded.

**Please Initial Box**

4. I understand that any data collected during the study may be looked at individuals from CT-LAC, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in the study. I give permission for these individuals to have access to this data.

**Please Initial Box**

5. I understand that any information I give that is included in the study will be anonymised and that my family will not be identified. I understand that I can have access to this information.

**Please Initial Box**

6. I agree to take part in the above study.

**Please Initial Box**

Name of Foster Carer

Date

Signature

Name of Person Taking Consent

Date

Signature

**When completed 1 for participant 1 for the research site file 1 (original) to be kept in child's file**

**Participant Consent Form: Foster Version 2 - 23<sup>rd</sup> October 2009**

## TRUST LOGO

### Information Sheet for Social Worker

I have been doing a Clinical Doctorate at the Northern School of Child and Adolescent Psychotherapy in partnership with the Tavistock and Portman NHS Foundation Trust in London, which is a national centre for the training of child and adolescent mental health professionals and also a major provider of mental health services. As part of that course, linked to the University of East London (UEL), I am now writing a research thesis on supporting foster carers in helping young, 'looked after children' manage change and their anxieties and difficulties in making new relationships.

As part of this I would like to research what can be learned from my work with ... (name of child) ..... and share this thinking with other professionals so that they can use what has been learned to help other children and young people in the future. Doing research like this is an important way of developing and improving our understanding about the help we can offer children and young people with the difficulties they and their foster carers encounter.

You do not have to agree if you do not want to. Whether or not you do will make no difference to any further treatment that ... (name of child) ... may receive in the future, nor will ... name of child .... or you benefit in any way if you do agree.

I will change names and other details so that no-one will be able to recognise (name of child) .... or your family.

If you wish, I will provide you with the factual statements I make about ... name of child .... and with information about the way I have changed his/her details.

The completed dissertation will be lodged in the Tavistock library, as would any subsequent publication based on it. If when ... name of child ... is old enough, (s)he is interested in seeing what has been written (s)he will need to contact the Organising Tutor of the Clinical Doctorate in Child and Adolescent Psychotherapy at the Tavistock clinic who will put you in touch with me. This is also the person you should contact should you wish to make a complaint about this process.

**Information Sheet for Social Workers Shortened Version**  
**Version 1 -13<sup>th</sup> August 2009**

## TRUST LOGO

### Preliminary Consent for Social Workers Form A

CT-LAC (Consultation and Therapeutic Services for 'looked after children') is currently involved in a programme of research, training and publication in order to promote our understanding of problems that 'looked after children' and young people in care encounter.

We would like your permission to use what we learn from our work with (name of child) in order to help others in the future. Anything we did use would be completely anonymised so that it is not recognisable to others. If at any point in the future you wished to withdraw your agreement this would not affect the treatment you were offered

The details of the children's psychotherapy group and the research project have been explained to me.

Initial Box Please

☐

I have understood and would like to take part.

Initial Box Please

☐

<b>Name of Child's Social Worker</b>	<b>Date</b>	<b>Signature</b>
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<b>Name of Clinician</b>	<b>Date</b>	<b>Signature</b>
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**Preliminary Consent Form for Social Workers**

**Version 1 - 13<sup>th</sup> August 2009**

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Rated \_\_\_\_\_

## **Appendix D**

### **An Extract of a Clarification Document submitted to Ethics**

#### **The Primary Research Question**

**What can be learned from comparing the narrative accounts of foster carers describing children in their care with a child psychotherapist's experience of the same children in a children's psychotherapy group?**

#### **The Secondary Research Question**

**Are these comparisons useful in planning future support and treatment for the children and their foster carers?**

The aim of the investigation will be to explore a short-term children's psychotherapy group for 'looked after children' through the use of semi-structured interviews with the children's foster carers. The material from the semi-structured interviews will be compared with the material from the process recordings of the children's psychotherapy group. Process recording are detailed subjective notes made immediately after each of the group sessions.

The investigation seeks to consider links between the group experience and the experience of the foster carers. It also seeks to explore these links in thinking about the children and the nature of their relationship difficulties.

One aim, for example, will be to investigate whether the counter transference experiences occurring in the group might usefully inform work with the foster carers; to consider what might be gained from the

experience of the group. Another aim will be to study other group phenomena and their links to the foster carers' experience.

**b. What are considered to be the risks to the child of ending the group sessions?**

The children are being selected for the children's psychotherapy group rather than for the research project. The process of selection can be long and the assessment focuses on a number of key areas.

All of the children selected for the group will have experienced early trauma and disruption and their inclusion in the ten week group will be considered in the light of their early histories, their current placement and future placement plans. How the children are likely to manage a ten week group is considered and careful work is undertaken to help the children manage the ending of the group and their relationships with the group leaders and the children in the group. There is a risk that individual children will be distressed by the ending of the group. This distress will be identified and the child supported with this. Helping the children cope with change, with coming together and separating, with loss is a function of the group. For most children the ending of the group may be the beginning of long term therapeutic work or specific support for their foster carers.

**c. How are the children assessed as being too sensitive or vulnerable?**

A child would be considered too sensitive or vulnerable for the children's psychotherapy group if it was anticipated that they would have such a difficulty with separation that they would find the group too overwhelming. A child would be considered too sensitive or vulnerable for the children's psychotherapy group if they are likely to move during the course of the group or be affected by other significant changes. A child will be assessed



as too sensitive or vulnerable for the children's psychotherapy group if they are deemed to require a level of support in the group that would identify them as different to the other children in such a way as to lead to them being 'scapegoated' by other children in the group.

**d. How would the researcher choose those children whose presentation is too similar to others?**

Children are selected for the group on the basis of a number of criteria. The aim is to select a heterogeneous group; that is a group of children that have a range of different presentations and coping strategies. By doing this it is hoped the children will learn more from each other and gain more from the group.

If there are too many children with a particular presentation, aggressive acting out behaviour or sexualised behaviour for example, the children will be chosen for the group on the basis of their need, their capacity to make use of the group, their reliability of attendance and future plans (in relation to future placement, for example). The availability of other sources of support, other means of assessment and the children's accessibility to these will be considered as will the time frame available for such work.

Amended information sheets and new consent forms are attached.

**(ii) Does the child have the right to drop out of the group?**

The children's psychotherapy group are a means of assessment and a method of treatment. The children are all aged between 4 and 7 and as such cannot make a decision to drop out of the group. Children will be asked about attending the group and will be asked to give their assent to their coming to the group. The children will be supported within the group

with any difficulty they may have and their foster carers supported in helping the children outside of the group.

There is a way in which the children can be deemed to be giving their emotional consent to the group by their capacity to engage in the group.

I have also attached the documents the committee required (the flow charts, the amended information sheet for foster carers and the new consent form).

## **Appendix E**

### **The Anna Freud Story Stem Assessment: Miriam Steele, Saul Hillman and Kay Henderson**

The story stem assessment consists of a structured series of thirteen narrative stems. These present children with a range of different family scenarios with the beginnings of a story, using dolls and animal figures as well as language. The child is then invited to complete the story in any way they like.

The story stems allow assessment of the child's expectations and perceptions of family roles, attachments and relationships, without asking the child direct questions about their family, which might cause conflict or anxiety. The story stems are useful as they encourage verbal and nonverbal forms of representation. The latter is important as it allows the child to display memories and expectations which are not part of verbally based memory, or which the child might be anxious about putting into words. In this way the child can reveal underlying expectations of interactions and relationships; which are part of "procedural" memory rather than verbally based memory; or which may be at odds with the way in which expectations and events are portrayed verbally to the child or in which the child tries to portray these to themselves or to others.

The story stems are designed to elicit themes concerned with the child's expectations of relationships between adults and children. These include such areas as giving affection and setting boundaries as well as those most central to the construct of security and attachment, namely whether the child displays an expectation that parents will be aware when children need protection and comfort and will respond appropriately to this need. They also elicit indicators of other aspects of the child's functioning, such as the modulation of aggression, aspects of peer and sibling relationships and certain defensive manoeuvres.

Whilst not a simple copy of their experience the technique provides an insight into the child's working model of attachment and can be systematically related to their experience.

Using the story stem rating scheme certain themes have been identified as being present more often in maltreated children and those with attachment difficulties. Among these are avoidant defensive manoeuvres, themes of aggression, catastrophe, injury or death to children and adults, adult unawareness of children's distress, bizarre and atypical responses, self-blame, and themes of throwing out or throwing away. Maltreated or attachment disordered children's narratives also less commonly show children receiving help from adults, children themselves showing realistic mastery, or ordinary realistic domestic scenes.

***Story Stem Assessment Information 13th August 2009***

## **APPENDIX F**

### **School observations**

Prior to the start of the group, the co-leader carried out school observations on all of the children being considered for the group. These school observations were discussed with the child psychotherapist prior to the commencement of the group and represented a means of assessing the suitability of the children for inclusion in the group. They were also a way for the two co-leaders of getting to 'know' the children before the start of the group.

Additional school observations were undertaken of Liam and the reason for this and what emerged from the observations is discussed on page 199 in the research project.

The observations of the other children in the group are included here to assist the reader.

In the school observation of Jason, the co-leader described how hard it was for her to locate Jason within the classroom setting. He seemed to be disengaged and separate from his peers and to have isolated himself from the class activity. The co-leader observed Jason for some time and watched him as he followed the activities of a taller, dual-heritage boy seated at the back of the classroom. Jason followed the boy's activities intently and seemed to use the boy as a way of joining the group. His engagement with his class only seemed possible through Jason's link with this other boy. This link did not involve a direct connection with the other boy but was more of a parallel shadowing of his activities. Despite this, Jason's link with the boy was the only connection that had energy. The co-leader was struck by Jason's presentation in the classroom and made reference to this over the course of the group. She felt that Jason was the neediest of the children in the children's psychotherapy group. There

seemed to be something of the co-leader's experience of Jason in the classroom that alerted her to his presence in the group.

The co-leader observed Nelly in her classroom setting and was struck by the level of control she seemed to need to exert over her peers. She was engaged in a play activity that involved a cash register which she used to control the other children in the classroom. The co-leader was mesmerised by Nelly's activity with the cash register. In addition Nelly seemed to keep her peers waiting and this appeared to be another way of exerting control. The co-leader found watching this play rather compelling and was struck by Nelly's need to control the pace and regulate the physical closeness of the other children. This memory of Nelly stayed with the co-leader.<sup>31</sup>

In the co-leader's observation of Eleanor, she noted Eleanor seemed quiet and inhibited and very much in the background. She did not seem to be engaged with her peers and appeared to be easily lost from the minds of her teacher and the other children in the class. The co-leader thought that Eleanor's needs could be easily missed.

Denham was the last child the co-leader observed in his classroom setting. He appeared to be a very bright and popular boy. He was actively engaged with his peers in physical activity. Denham seemed skilled in his interactions with the other children but the co-leader found it quite hard to recall her sense of him and the events of the observation.

All of these observations appeared to be consistent with the experience of the children in the group and this suggests that working with the children's school could be of huge benefit for the children.

---

<sup>31</sup> Both Nelly's SSAPs were undertaken at her school and she seemed to need to exert the same kind of control when moving from her classroom to the room where the SSAPs took place. Moving from the classroom to the other room was a disorientating and confusing experience for the child psychotherapist.

## **The Story Stem Assessment Profiles (SSAPs)**

The researcher has extensive experience of carrying out SSAPs with children with early experiences of trauma and disruption and is aware that children can find these stories disturbing and disorientating. Hindle (2000) used SSAPs as a means of triangulating the data in her research project entitled 'Intensive assessment of a small sample of siblings placed together in foster care'. Hindle considered that some of the disturbances that she found in the children's story stem completions were linked to changes in her role (she undertook psychotherapy assessments as well as the SSAPs with the young children in her research project). She thought that some of the disturbances elicited in the story stem completions were linked to the changes in her presentation, the difference between the children's experience of her in a psychotherapy assessment and their experience of her presentation in the SSAPs.

In addition to this she identified what she described as encapsulated memory states.

The researcher's clinical experience of undertaking SSAPs, both generally and within this research project supports Hindle's view. Elements of the children's story stem completions resonate with experiences described by Hobday (2001) in her paper on timeholes. They certainly resonate with the clinical material highlighted from the group. Sudden changes in focus, unexpected incoherent narratives, bizarre and atypical experiences are terms that can be used to describe the experience of the children in the group and some of the children's story stem completions.

Analysing a number of the children's story stem completions (see below) seems to echo the experiences of observing the children in the group and adds weight to the argument that children with early experiences of trauma and disruption are easily disorientated and lost. This would appear to be consistent with Bretherton, Ridgeway and Cassidy's (1990) view that 'we must evaluate our inferences about children's and adults' internal working

model for attachment against observational assessments of the child's actual relationship'. They argue that they do not stand as evidence in their own right.

Looking at the children's story stem completions in this research project we can see how these often resonate with experiences of the children in the group. This gives additional support to their story stem completions as they can be verified by direct observational evidence. In this way, information from the SSAPs triangulates data from the group and vice versa.

This evidence may have less validity however as the children have experiences of the researcher in the group and this might influence their second SSAPs. The SSAPs in the context of the group have a specific function. They are designed to help the children join the group and are a way of taking care of them once the group ends. In this sense, they do not follow the SSAP research protocol. The information they provide however can be utilised.

Previous research has established distinct SSAP patterns of coding (see below) that are relevant to young children who have suffered maltreatment. More themes of aggression, neglect and sexualised play have been reported in the stories of 4 and 5 year old maltreated children than in samples of children that were not maltreated (Buchsbaum, Toth, Clyman, Cicchetti and Emde, 1992).

According to Hodges, Steele, Hillman, Henderson and Kaniuk (2003) more avoidance manoeuvres were found with children with experiences of maltreatment than in the story stem completions of non-maltreated children. Maltreated children showed more disorganized characteristics, with extreme aggressions and catastrophes erupting into their narratives. Bizarre, unrelated material sometimes reminiscent of displacement activities in the face of competing or conflicting demands, were often present.



This is consistent with the story stem completions with the four children in this research project who completed two SSAPs, one prior to the group and one immediately following the end of the group. Their story stem completions scored high on themes of aggression, throwing away/out, bad->good shifts, bizarre atypical responses, child endangered and low on pleasurable domestic life, adult provides comfort, and adult provides protection. There were notable high scores on avoidance within the narrative frame and changing the narrative frame. This coding presentation is consistent with some of the findings highlighted above.

Examples of the completed story stem assessments and the coding form can be found below.

## SSAP CODING SHEET

Child Number: \_\_\_\_\_

Rated By: \_\_\_\_\_

STORY STEM (SSAP)	CO	LP	SE	PFS	BIK	SJ	MH	3C	BH	LK	BS	BD	EX
1 No engagement (with Story Task)													
2 Disengagement													
3 Initial Aversion													
4 No Closure													
5 Premature foreclosure													
6 Changing Narrative Frame													
7 Avoidance within Narrative Frame													
8 Child seeks Help, Comfort													
9 Siblings/Peers Help, Comfort													
10 Realistic Active Mastery													
11 Child Endangered													
12 Child Injured/Dead													
13 Excessive Compliance													
14 Child 'Parents' or 'Controls'													
15 Adult Provides Comfort													
16 Adult Provides Help Protection													
17 Adult Shows Affection													
18 Adult Unaware													
19 Adult Actively Rejects													
20 Adult Injured/Dead													
21 Limit Setting													
22 Physical Punishment													
23 Child Shows Aggression													
24 Adult Shows Aggression													
25 Coherent Aggression													
26 Extreme Aggression													
27 Catastrophic Fantasy													
28 Bizarre/Atypical Responses													
29 Bad <-> Good Shift													
30 Acknowledgement Child Distress													
31 Acknowledgement Adult Distress													
32 Denial/Distortion of Affect													
33 Repetition													
34 Neutralisation/Diversion Anxiety													
35 Pleasurable Domestic Life													
36 Throwing Away/Out													
37 Magic/Omnipotence													
38 Sexual Material													
39 Self Blame													

## SSAP CODING SHEET

Child Number: \_\_\_\_\_

Rated By: \_\_\_\_\_

STORY STEM (SSAP)	CO	LP	SE	PFS	BIK	SJ	MH	3C	BH	LK	BS	BD	EX
1 No engagement (with Story Task)	2	0	0	0	0	0	0	0	0	0	0	0	0
2 Disengagement		0	0	0	0	0	0	0	0	0	0	0	0
3 Initial Aversion		0	0	0	0	0	0	0	0	0	0	0	0
4 No Closure		0	0	0	1	2	0	0	0	0	0	0	0
5 Premature foreclosure		0	2	0	0	0	0	0	0	0	0	0	0
6 Changing Narrative Frame		0	2	0	2	0	0	0	0	0	0	0	2
7 Avoidance within Narrative Frame		0	2	0	0	0	0	2	1	1	2	0	2
8 Child seeks Help, Comfort		0	0	0	2	0	0	0	1	0	0	2	0
9 Siblings/Peers Help, Comfort		0	0	2	2	0	2	0	0	0	0	0	0
10 Realistic Active Mastery		1	0	2	2	2	2	0	0	0	2	2	0
11 Child Endangered		2	0	0	0	0	0	2	0	0	0	0	0
12 Child Injured/Dead		0	0	0	0	0	0	0	0	0	0	0	0
13 Excessive Compliance		0	0	0	0	0	0	0	0	0	0	0	0
14 Child 'Parents' or 'Controls'		0	0	0	0	2	0	0	2	2	2	0	2
15 Adult Provides Comfort		0	0	0	2	0	0	0	0	0	0	0	0
16 Adult Provides Help Protection		0	0	0	2	0	0	2	0	0	0	2	0
17 Adult Shows Affection		0	0	2	?	0	0	0	0	0	0	0	0
18 Adult Unaware		0	0	0	0	0	0	0	0	0	2	0	0
19 Adult Actively Rejects		0	0	0	1	0	2	0	2	2	2	0	0
20 Adult Injured/Dead		0	0	0	0	0	0	0	0	0	0	0	0
21 Limit Setting		0	0	2	0	0	2	2	2	2	0	0	0
22 Physical Punishment		0	0	0	0	0	0	0	0	0	0	0	0
23 Child Shows Aggression		0	0	0	0	0	0	0	1	0	0	0	2
24 Adult Shows Aggression		0	0	0	0	0	0	0	2	0	0	0	0
25 Coherent Aggression		0	0	0	0	0	0	0	2	0	0	0	0
26 Extreme Aggression		0	0	0	0	0	0	0	0	0	0	0	2
27 Catastrophic Fantasy		0	1	0	0	0	0	0	0	0	0	0	2
28 Bizarre/Atypical Responses		0	1	0	2?	2	0	2	2	2	2	2	2
29 Bad <-> Good Shift		2	2	0	0	0	0	0	2	2	0	0	2
30 Acknowledgement Child Distress		2	0	0	0	0	0	0	0	0	0	0	0
31 Acknowledgement Adult Distress		0	2	0	0	0	0	0	0	0	0	0	0
32 Denial/Distortion of Affect		0	1	0	0	0	0	0	0	0	0	0	0
33 Repetition													
34 Neutralisation/Diversion Anxiety		2	0	0	0	0	0	0	2	0	0	0	?
35 Pleasurable Domestic Life		0	0	2	2	0	0	0	0	0	0	0	0
36 Throwing Away/Out		0	2	0	0	0	2	2	0	0	0	0	0
37 Magic/Omnipotence		2	2	0	0	0	0	2	0	0	0	0	2
38 Sexual Material		0	0	0	0	0	0	0	0	0	0	2	0
39 Self Blame		0	0	0	0	0	0	0	0	0	0	0	0

## **An example of a story stem**

The picture from school story stem is the only one of the thirteen story stems designed specifically to elicit positive representations of parental responses. Paradoxically however, in clinical samples of maltreated children, this story stem commonly elicits bizarre, catastrophic and extreme aggressive responses. Children sometimes provide the expected positive script but with flat or otherwise inappropriate affect. According to Hodges, Steele, Hillman, Henderson and Kaniuk, (2003) children know the desirable “script” (praise, admiration etc.), but their efforts show these are disrupted by more negative representations. In contrast, this stem in particular elicits the theme of realistic/positive domestic play in non-maltreated samples. (Hodges and Steel, 2000).

The researcher has chosen this particular example of a story stem because of its links with the core category ‘Presentation’ as described in the research project. Whilst the researcher has some interest in what the SSAP describes as the child’s internal working model and the existence in the child’s internal world of the rejecting, negative parental figures. For the purposes of this research project, the researcher is more interested in how the child presents the good picture done at school to their mother and father at home.

Picture stories completed by the four children in the group are included below.

### **STORY STEM - STORY FOUR: PICTURE FROM SCHOOL**

Characters: Child 1, Child 2, Mum and Dad

Props: Sofa, side of house, paper

Layout: Mum and Dad and Child 2 sitting on a chair. Child 1 is separate (at school)

## **STORY FOUR: PICTURE FROM SCHOOL**

### **Story**

So here's Mum and Dad and (Child 2) are at home and (Child 1) is at school (show Child 1 separate)

And (he or she) was at school and did a really good drawing. And (he or she) thought "This is a really good drawing I have made. I'm going to take this home when I get home from school."

So, then school ended and (he or she) took (his or her) picture and went home, it was just around the corner – and (he or she) knocked at the door.

**Show me and tell me what happens now?**

### **Prompts**

**One prompt only**

**If no mention of the picture, then ask, "What about (his or her) picture?"**

If nothing happens, then ask, "Does anyone say anything about (his or her) picture? What do they say or do?"

### **Eleanor's picture from school story**

Eleanor says that (identified child) says "look mum, look at my good picture." Mum says "put it in your bedroom." And then ... when she's asleep

and it's bedtime then (identified child) goes up and up and up and gets her picture and puts it in her bedroom. It's downstairs and hides it. Then it's night time and then mum and dad wake up and then she puts the picture here. She's climbed up here. Then she says "where's my picture?" Then she looks round there, then she looks downstairs, then she goes out and then she says I'll look on top of the roof. And she goes up and then she finds it! Then she was big enough to jump down. Then she goes to school again and then she comes back home, rings the bell and goes in and says she's done a good picture again. And then she goes in there and then she goes out the door and plays on the swing again and that's the end of the story. When can we play?

### **Nelly's picture from school story**

Nelly says that (identified child's) little sister answers the door as she doesn't want to disturb Mum and Dad as they're watching TV. The picture is of a castle the two sisters go upstairs and sit on the ledge. It is not a dangerous ledge – it would be dangerous if they were close to the edge. They put the picture up...

### **Denham's picture from school story**

Denham begins with a long pause and starts, then... "Mum I've got a picture, I've got a picture". "Show me inside". (Talks very quietly) – she faints cos it's that good. The researcher asked 'Is that the end of the story?' Denham replies no... Two days later. They got the pool out cos it was a sunny day and (identified child) went up to his bedroom, climbed onto the roof. There was a massive pool. And he did 3 back flips into the pool. Yeh, then he went to his school around the corner and because it was open and no-one was there. So, he sat down, then he went onto his back. Then he flipped up. Then he saw the gate to the playground and he zoomed to it and then he was in the playground playing football with the other guys.

Then he did a backflip while he was having a shot. Then cos he knew he was good at gymnastics, he did a handstand and blocked the ball. He goes to the gate. Aims for the right top corner of the goal and he shoots... Then his mum picked up the picture, puts it with his display. Up in his room. Then when he was playing football, he was aiming just to the goal, in the right corner, and he chipped it and curved it. Yeh. Cos he did it so powerful, he kind of did a diagonal back flip and was twisting at the same time. Then he went home and said... End of story.

### **Jason's picture from school story**

Jason says (identified child) drops the picture and then it gets all wet because it was a rainy day. And then he went. He asked his teacher can he draw another one and then she said, quickly. Yea. And he goes home. Rings the bell. Dad comes. "Oh hello." Hello dad this picture's for you. And looks at it. He went to see if it was good. Dad thought it was. "Oh wow, that's better than my drawing." And then he felt really good. When his dad said it was better than his drawing. He put it somewhere in his bedroom. Then he looks for other things he could draw. Yea. Yea with his head sticking out. Then he falls down. Yea. He rings the doorbell. Dad comes to it. He says he wonders who it is. "What have you done?" "I hurt my head". "Oh don't do that again." Then he went to lie on his bed. And his cushion. It falls in the mud – he steps on... It's alright you can still make another... Good picture says dad... Good picture says his brother – Good story...

The SSAPs are useful in that they provide additional information. Below is an experience with a boy not selected for the group:

Michael was playing in the area just outside of reception when I arrived to collect him. He was reluctant to come with me. One of the Reception Teachers encouraged him to come saying he could take his fireman's helmet. He came with me (with his helmet) a little reluctantly, keeping at

quite a distance at the back of me but following behind. However in the middle of the hall Michael suddenly stopped, dropped his helmet onto the floor and was moving to go back. He took some encouragement to continue coming with me. Despite this initial difficulty, Michael remained with me and engaged in all thirteen stories.

This observational material gives some information about Michael's difficulty with transition. As well as the story stem completions, the experience of undertaking an SSAP often gives useful additional observational material.

## **APPENDIX G**

### **The Co-Leaders' Meeting after the First Group Session**

The two co-leaders met immediately after the first session to reflect on their experience. Included are the child psychotherapist's notes from this meeting:

There was so much activity, so much emotion to soak up in this first session. Indeed in this particular session there were many aspects of the



group experience that were to stay in our thinking throughout the group; the foster carers' idea of the children managing, a foster carer being ill (illness amongst the foster carers was to become a repeated occurrence over the course of the group), the competing needs of the children and all that became visible within the group setting.

Afterwards, absorbing, digesting and processing the experience of the group together, the predominant theme in this first session appeared to be one of **missing**: even at the beginning, coming together stage of the group, the children seemed to be in touch with loss. There was a way that the ending was already present.

This may be part of the ordinary process of starting new things (Wittenberg, 2013) but it felt particularly poignant with this group of children. The panic with Jason at the beginning was hard to think about; there seemed to be a powerful anxiety about not having or losing your place.

There were obvious links to families when the introductions took place. Denham was clearly identified with his birth family and talked of his brother, the new baby born after he came into care. Throughout this session there was a recurring theme of missing, missing siblings ... This theme put us in touch with the reality that all the children in this group have been separated from siblings.

Even though we had been previously aware of this, in our post session discussion, this realization seemed new and sudden. Our immediate thought was one of guilt and responsibility and that this should have been considered prior to the group's commencement; that we had somehow missed something and that this missing had led to an omission that had inflicted pain and that that pain could have been avoided.

Could something different have been done? The reality, when we had processed the experience, was that separating siblings was all too common and that guilt was a recurring experience when co-leading the group.

Bringing these children together in itself evoked guilt; guilt in the minds of the children and guilt in the minds of the adults co-leading the group. There was an awareness of the children who were not included in the group that were nonetheless starkly present. For Nelly perhaps - her missing brother Mark - who was considered for the group but not included, and her younger brother Adam, who was missing because he had been adopted. This links with Margaret Rustin's idea of 'families in mind.'

For the adults co-leading the group, there was an equally powerful sense of missing children, other children not included. Children from other groups and other children who might have benefitted from the group... One wonders about the parallels for foster carers, with other missing children in their minds... (Mr. L.'s comments about Liam's adopted sister.)

Prominent in the minds of the co-leaders throughout the group session was the painful idea that by setting up a fixed term children's psychotherapy group for these young, vulnerable children in transition, the two co-leaders were complicit in adding to the children's difficulties; that they had deliberately in some way created yet another rupture, yet another loss.

The group provides a unique opportunity to help the children and begin to address their difficulties, but in doing so confronts vulnerable children with yet another ending. The experience of providing these children with something inevitably evokes a painful awakening, an awareness of what was not provided earlier, a process clearly described and identified in Gianna Williams' work on 'double deprivation' (Williams, 1997). This is the children's experience when provided with something. It is the experience co-leading the group. Anxiety about making mistakes and getting things wrong links the experience of leading the group to the foster carers' experience parenting these children.

The group not only provides a unique opportunity to work on this area with the children but a resource that can help to deepen our understanding. The

group provides us with our own real live experience, which in turn puts us in touch with the foster carers' repeated experience of trying to provide the children with good parental care.

By focussing on our experience of the group (and its links with the foster carers' experience) an opportunity is created to explore these issues in depth.

## **Appendix H**

### **Semi-Structured Interview**

Main areas to be covered:

#### **The carer's picture of the child**

Describe / adjectives about the child, first things that come to mind

The child's difficulties or struggles

Exploration of the adjectives given from first question to gain further sense of meaning (controlling, difficulty re night time etc.)

The child's sense of self

What do you think (Name) picture of themselves would be?

What adjectives would they use?

How do you think they would describe themselves?

The child's relationships

How would you describe the quality of (Name) relationships?

Possible prompts - relating to peers - relating to teachers - relating to adults generally (differentiate between older, middle aged, younger, adolescents)  
- to strangers - to professionals (social workers, health professionals etc.)

The child's sense of them as a carer

How do you think (Name) would describe their relationship to you?

What do you think they understand of their current placement with you?

The child's history

How do you feel (Name) past impacts upon them now?

How do you think they understand their circumstance?

The child's sense of a parental couple

What do you think (Name) understands in relation to a parental couple?

Has this been their experience?

**The child's impact upon the carer...**

How does the child leave you feeling?

Explore.... Pull together thoughts descriptions and feelings expressed in previous discussions

**Thoughts about the group...**

How do you think they have been in relation to the group?

Have they spoken about the group? What have they said?

What do you think the impact has been of them attending the group (just after sessions, on the way to sessions) explore detail and particular situations (i.e. when----- didn't want to come, what was that like - being in the waiting area on their own).....

## Appendix J

Lines of Session Material	Initial Codes	Refining the Initial Codes
9.135 Nelly went to the group box and began emptying it...	Copying sequence	Repeating
9.136 Strikingly she repeated the same sequence	Climbing and dangling over edge	Climbing and dangling over edge
9.137 climbing into the group box after she had emptied this and dangling her legs over the side...		
9.138 I talked to the group and Co-Leader about this...	Talking to group and Co-Leader	
9.139 How she had done this at one end of the room and then at the other –	At both ends of the room	
9.140 something similar often happened with the tents	Similar happenings with the tents	
9.141- but I called Nelly Eleanor.	Calling N, E	Muddling thinking
9.142 Co-Leader and I were thinking about why the muddle in names had occurred	Thinking about muddling	Identities blurring
9.143 Eleanor had climbed into Nelly's space...	E being in L's space	Thinking about muddling
9.144 Co-Leader and I talked about needing to remember the children.	Needing to remember children	
9.145 There was talk about how the children seemed to think they needed to steal a place	Needing to steal a place	Own space

Lines of Session Material	Initial Codes	Refining the Initial Codes
9.146 in order to be remembered.	To be remembered	Remember
9.147 This occurred later with Jason.	Happens later with J	Stealing
9.148 Nelly seemed to be going through everything as if she was checking, with some determination, that there was nothing good that she had missed.	Going through and checking Determined not to miss anything good	Looking for something lost Finding
9.149 She seemed pleased when she found a colourful doll's romper suit that I had not seen before.	Pleased at finding romper suit	Babies / Blurring Forgetting
9.150 She found a baby lamb. I couldn't remember if she had played with the lamb before.	Found a baby lamb Forgetting	
9.151 I had an idea that she had carried around a baby animal	Idea of carrying baby animal around	
9.152 Before when the rest of the group had been engaging in a lot of play with babies.	Before when others were engaged with babies	Repetition
9.153 Denham was 'wrestling' with one of the large bears.	D wrestling with large bear	
9.154 He was by one of the tents and repeatedly throwing himself onto the floor with the bear.	Repetitive throwing of himself onto bear Smiling, the bear is flipping him	
9.155 He smiled and said the bear was flipping him over.		

## **Appendix K**

### **Focussed Codes – Children’s Group**

- 1. Absence 17**
- 2. Acknowledging or Accessing Help 12**
- 3. Affection 7**
- 4. Avoidance 109**
- 5. Babies 12**
- 6. Beginnings 7**
- 7. Being in Touch 107**
- 8. Blurring 17**
- 9. Calendar / Time 43**
- 10. Circle 11**
- 11. Deprivation 15**
- 12. Emptying 10**
- 13. Ending 42**
- 14. Forgetting 16**
- 15. Foster Carers 19**



16. Hiding 16
17. Identity 35
18. Image 4
19. Inside 2
20. Joining 32
21. Leaving Before Left 1
22. Loss 28
23. Memories 3
24. Missing 16
25. Occupation 13
26. Pairing / Twinning 3
27. Physical Activity 41
28. Play 10
29. Playing Dead 13
30. Preparation and Planning 30
31. Questions 11
32. Relating to Other Children 11

- 33. Robbery 16**
- 34. Safety 23**
- 35. Sexual Concerns 7**
- 36. Sibling Rivalry /Competition 15**
- 37. Space 8**
- 38. Thinking 24**
- 39. Transference 32**
- 40. Transition /Corridor 67**
- 41. Working Couple 4**

## Appendix I



Simon Cregeen  
Tavistock Centre

ETH/11/30  
05 March 2010

Dear Simon,

**Application to the Research Ethics Committee: Do the narrative accounts of foster carers mirror the material of a short term children's psychotherapy group for looked after children. (C Chester ).**

I advise that Members of the Research Ethics Committee have now approved the above application on the terms previously advised to you. The Research Ethics Committee should be informed of any significant changes that take place after approval has been given. Examples of such changes include any change to the scope, methodology or composition of investigative team. These examples are not exclusive and the person responsible for the programme must exercise proper judgement in determining what should be brought to the attention of the Committee.

In accepting the terms previously advised to you I would be grateful if you could return the declaration form below, duly signed and dated, confirming that you will inform the committee of any changes to your approved programme.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Simiso Jubane', is written over a horizontal line.

Simiso Jubane  
Admission and Ethics Officer  
s.jubane@uel.ac.uk  
02082232976

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### Research Ethics Committee: ETH/11/30

I hereby agree to inform the Research Ethics Committee of any changes to be made to the above approved programme and any adverse incidents that arise during the conduct of the programme.

Signed:.....Date: .....

Please Print Name: